AFRICA: FAMINE RELIEF AND REHABILITATION

HEARING

BEFORE THE

SELECT COMMITTEE ON HUNGER
HOUSE OF REPRESENTATIVES

NINETY-NINTH CONGRESS

FIRST SESSION

HEARING HELD IN WASHINGTON, DC, JULY 25, 1985

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AFRICA: FAMINE RELIEF AND REHABILITATION

THURSDAY, JULY 25, 1985

House of Representatives,
Select Committee on Hunger,
Washington, DC.

The Select Committee on Hunger met, pursuant to notice, at 9:30 a.m., in room 2212, Rayburn House Office Building, Hon. Tony P. Hall (acting chairman) presiding.

Members present: Representatives Leland, Daschle, Fazio, Dorgan, Roukema, and Gilman.

Also present: Representative Weiss.

OPENING STATEMENT OF HON. TONY P. HALL, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF OHIO

Mr. **Hall**. We want to thank all of you for being here today. My name is Tony Hall, and I'm chairman of the Select Committee on Hunger's International Task Force. This is a hearing on relief and rehabilitation requirements in sub-Saharan Africa.

I think many of us feel fairly knowledgeable on the root causes of famine and drought in Africa. The concerns we have today are the nonfood requirements for relief and rehabilitation assistance.

It's my understanding that the response to the African famine has been so overwhelming that this country has given 28.5 pounds of food—for every American—to the continent of Africa to fight this famine. That is an amazing statistic.

This hearing is an attempt to discover the status of relief and rehabilitation measures; what additional steps must be taken; and what we can do to help. We're here to learn; we're here to probe; we're here to get a better understanding.

I have a formal written testimony to submit for the record.

We have many members of the committee here today. I will first ask the ranking minority member on the Select Committee on Hunger, Mrs. Roukema, for any opening statement.

[The prepared statement of Mr. Hall appears at the conclusion of the hearing, see p. 65.]

OPENING STATEMENT OF HON. MARGE ROUKEMA, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF NEW JERSEY

Mrs. **Roukema**. Thank you, Mr. Chairman. I would like to make a statement.

This morning, the Select Committee on Hunger will continue its study of the African famine, one of the great tragedies of this decade. Millions of people on the continent are suffering from famine and disease. When I visited Ethiopia last year with some of my colleagues, and the distinguished chairman of the committee, Mr. Leland, we saw in graphic and heart-rending detail, the devastation of human lives.

Those who survive continue to suffer. Along with disease, they endure the threat of impending death if emergency food donations cease or if the delivery systems fail. That threat makes more evident the need for our continued relief efforts. Millions have been saved from death and disease by the emergency assistance efforts of the United States, international organizations, and other countries.

Our country's response to this human catastrophe has been exemplary. At President Reagan's insistence, our official efforts have been second to none in the international community. The characteristic generosity of the American people has been manifested in an outpouring of contributions, as Chairman Hall has already mentioned. We are very pleased to welcome here today, our AID Administrator, Mr. M. Peter McPherson. His Agency for International Development is largely responsible for the success of the massive emergency assistance program that the United States has undertaken.

Your commitment, Mr. McPherson, and your diligence, in attempting to overcome the hindrances to the timely and effective delivery of relief, deserves our commendation. We are most pleased to have you with us today.

The challenge we face as a donor nation is not only to give what is needed and readily usable, but also to insure that what we provide gets to those who need it. Some newspaper and commentator accounts would give the impression that U.S. assistance is plagued with problems and frustration.

Some problems have been caused by the misdirected policies of the governments that we are assisting. I have been disappointed and, at times, outraged, as I'm sure other members of the Committee have been, by these governmental policies. We must maintain our resolve that they will not deter legitimate relief efforts.

Nevertheless, I believe the story of our assistance to the famine stricken people of Africa, despite all the obstacles, is largely a story of success. Literally millions have been saved from death and disease because of our efforts. But as we continue providing emergency assistance, we must not lose sight of our long-term development goals in the affected countries. We must lay the proper ground work, so that the recipient nations may begin to provide for their own basic needs. There is a point at which emergency food aid can deter local food production.

We most avoid all efforts that might lead to counterproductive results. Our goal must be to meet critical emergency needs while promoting self-sufficiency, not dependence. I'm pleased to have our witnesses here today. We expect to learn more about how we can do things better, and how we can increase our commitment.

Thank you, Mr. Chairman. I ask unanimous consent that the full text of my remarks be inserted in the record.

[The prepared statement of Mrs. Roukema appears at the conclusion of the hearing, see p. 68.]

Mr. Hall. Thank you, Mrs. Roukema.

We have our very distinguished chairman of the Select Committee on Hunger, Mr. Leland, from Texas. Chairman Leland has a statement that he would like to make.

OPENING STATEMENT OF HON. MICKEY LELAND, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF TEXAS

Chairman **Leland**. Thank you, Mr. Chairman.

The African famine crisis has become the most horrifying symbol of hunger and malnutrition on the face of the Earth. The urgency of the situation in some 20 countries across sub-Saharan Africa has required our constant attention and concern and best efforts over the past year.

Today, the situation is better in some areas, but clearly worse in the Sudan, Mozambique and parts of Ethiopia. We cannot afford to lower our guard or lessen our efforts in any manner or form. Basic morality requires us to continue this fight for as long as it is required.

I do hope, however, that the generous and effective response to the needs of these innocent victims of drought, famine, and civil war in Africa by the international community, the U.S. Government, and the American public represents a stronger commitment to eradicate hunger wherever it might be.

The children of Africa are only the most visible victims of hunger and starvation. There are so many more.

I look forward to the testimony of our witnesses, and the chance to review plans for our continued efforts to win the struggle against this famine.

I'd like to say that I'm most proud of the relationship that we have established with AID through the efforts of its Director, Mr. McPherson. And I hope that we will continue to enhance that relationship and work even closer. I'm proud of the fact that the American Government and the American people have, indeed, contributed more than any other donor nation in the world to this emergency. But while we have contributed more, and we have been most generous, with our vast resources we can even be more generous.

Thank you, Mr. Chairman.

[The prepared statement of Mr. Leland appears at the conclusion of the hearing, see p. 72.]

Mr. **Hall**. Thank you, Mr. Chairman.

We have present another member of the select committee, Mr. Daschle. Congressman Daschle, do you have a statement you would like to make?

OPENING STATEMENT OF HON. THOMAS A. DASCHLE, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF SOUTH DAKOTA

Mr. **Daschle**. I don't really have a formal statement, Mr. Chairman. I would only say that I think it's commendable that the committee is holding these hearings. I think it's crucial that during this difficult time, when we try in various ways to analyze the success that this country has had in meeting the needs of our programs in Africa, that we analyze not only their success but their long-term need and the policies that may be necessary, as we consider legislation the rest of this year and the next year.

Obviously, in meeting emergency needs, this country has been overwhelming in its generosity, but how can we translate that into long-term policy that not only can prove successful in the short term, in emergency situations like this, but how can we implement a policy in a long term that will not only meet emergency needs, but long-term policy implications that will reflect what we've demonstrated so successfully now, as we look toward Africa.

That's what I hope this committee will do and what sights we'll set, and I'm just hopeful, in the very near term, we can have a clearer view of what long-term policy with regard to hunger could be.

Mr. HALL. Thank you, Mr. Daschle. We also have with us Congressman Ted Weiss from New York. Representative Weiss is not a member of the Select Committee on Hunger, but all of us are aware of his efforts on hunger and famine and drought, and we're very glad to have him here.

OPENING STATEMENT OF HON. TED WEISS, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF NEW YORK

Mr. WEISS. Thank you very much, Mr. Chairman. I simply want to compliment the select committee and all of its members for the work that they've done, as well as Mr. McPherson and his group for the tremendous job that they've been doing under very difficult circumstances.

I welcome the opportunity to spend some time with you. Unfortunately, I have a subcommittee that I'm chairing at this exact moment, so I can't stay with you. With your permission, I will leave some questions if you would submit to the Director, and perhaps he will respond to them.

Thank you very much.

Mr. HALL. Thank you, Mr. Weiss.

We're very pleased to have with us this morning, as our first witness, Mr. Peter McPherson, Administrator of the Agency for International Development. Mr. McPherson, as many of us know, is very involved in this crisis. He has visited a number of sites in the most stricken areas of Africa. He has presided over one of the largest American relief efforts in history.

Mr. McPherson will testify on the current status of emergency relief operations and on rehabilitation measures that are being implemented in an attempt to get people back to their farms and livelihoods. Also, Mr. McPherson, hopefully, can focus on particular impediments or problems faced in managing various relief operations.

Thank you, Mr. McPherson, for being here. We look forward to your testimony, and to some questions that we want to pose to you later.

STATEMENT OF M. PETER McPHERSON, ADMINISTRATOR, U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT

Mr. McPHERSON. Thank you, Mr. Chairman. I have some written comments which I'd like to submit for the record and would, if permissible, like to proceed with some comments now.

Mr. HALL. Without objection.

Mr. McPHERSON. First, let me say that we in the administration particularly appreciate the bipartisan way in which this committee has gone about looking at this problem and working with us. It has been constructive and helpful.

We have, together, strongly supported this subcommittee and the Select Committee on Hunger and the administration, the President's basic position that a hungry child knows no politics, and I think that commitment, that position, combined with enormous public support and interest in adhering to this is no doubt the reason that we have been able to deliver the kind of relief that we have done.

There are indeed some enormous problems. And let me review some of those and talk about them, and I suspect that your questions will focus on some of these situations.

First of all, let's talk about Ethiopia. There is substantial food in the three major ports of Ethiopia in which we use to bring food into that country. That pileup in those ports is roughly stable the last couple of months, nevertheless, there is in excess of 100,000 tons of food there, and food that should be getting through to be fed to people.

The principal reason why we can't move the food faster is trucks. Ethiopia Government has thousands of trucks of its own, and frankly, we feel strongly that more of those trucks should be used to move this food. We know the Ethiopian Government can do it; we've seen it in the first few months of this famine or early months of this famine, of this year, where they put trucks really into this job, and for 2 or 3 months, food was moving at the point of one time, we were almost afraid we were going to be—there wasn't going to be food in the ports for the Ethiopian Government to move.

Certainly, that's not the situation any more. We need hundreds of additional trucks to do this job, and they are there in the country; the Ethiopian Government has them. The deep frustration we feel about this problem—and this is something which I haven't publicly talked about at all before this moment—is the situation of trucks. Of our trying to bring additional trucks of our own to move more of our own food into the country, and it appears that as of this hour, that we're not going to be able to do so.

My last report was a half an hour ago, just before I came here. We have been—we had planned to rent 100 trucks from Ethiopia, bring them into the country, Ethiopia just being to the south there, they would be, we'd bring them in—I beg your pardon, from Kenya, 100 trucks from Kenya, we'd bring them into the country from Kenya with Kenya drivers. They would be under the control of private volunteer organizations that are the distributors of our food.

But, as of this time, we can't get permission to do so. Some suggestion, it's informal, but some suggestions that the Ethiopians would rather have money instead of trucks. Well, we're not interested in money, we want trucks. There's some concern that some suggest the additional foreigners into the country. Well, these are Kenyans, and we think there's no reason why we can't bring people in to drive the trucks. That's how we can be sure that our food gets down.

Well, again, we have 100 trucks that we think we can get from Kenya, and we want to bring into Ethiopia to move our food and we can't seem to get that done this morning. And we've been trying for several days to do it.

There's problems in northern Ethiopia. There is a civil war in Ethiopia, and somewhat in excess of 2 million people Eritrea and Tigre, parts of Wallo, northern part of the country, that aren't being reached by the relief efforts to the degree that they must be reached.

We have not discussed publicly cross-border efforts from Sudan, but as I've said many times, cross-border in itself will not feed the people in the north. The Ethiopian Government appears ready now to allow some additional feeding into this area by Catholic Relief and World Vision. We think this is a very important step.

We hope well in excess of 100,000 people perhaps 200,000 people will be fed in this manner in the very near future. This has been in the talking and work stage for some time, but we have hopes as of this hour that that will take place shortly, and while I'm often critical of the Ethiopian Government, I certainly need to give them credit for something that is occurring.

We think much more needs to be done in the north, but this is a step—we hope—a step in the right direction.

Now, again, the problem is we don't have enough trucks to move the food. The Ethiopian Government has the trucks and we find again and again, we move something in, it seems like sometimes other peoples' efforts fade and so we've got to keep the focus of this need for trucks in the Ethiopian Government right there centerpiece.

Next, Sudan. Sudan, where we are providing massive amounts of food, the total amount of food that we'll provide; both disaster and title I will be in excess of 1 million tons of food, it is a situation that has gone generally fairly well, over the last year, and we got food early on into the west and it clearly helped. And the Vice President was there a few months ago, a lot of happiness in the west for how that was working.

Along the Ethiopian border, there was a time there was a bit of a crisis a few months ago. The refugees coming across. That seems to be in pretty good shape. Generally, we figure about 8 million people in the country are needy. A country of 22 million people, generally in decent shape with, however, one marked and very important exception and that is food out to the west.

A program that I was suggesting was working fairly well a few months ago, but now it is not, and there are a number of problems. The west in a place called Darfur, the province far west of the country, has about 2 million people, roughly, that we think need some food, and they are principally reached by a railroad going from a place called Kosti, out to Nyala, which is the far point in this province.

Sudan is a huge country. It's hard to really imagine the size of the country as we sit here. Sudan is the size of the Eastern United States—of the United States east of the Mississippi. A huge country. Vast areas that are hardly inhabited, difficult terrain in some places, and getting the food out there well over 700 miles is our struggle right now.

That train track on which we were principally relying and continue to feel we must rely upon substantially, one beginning for a few weeks ago, stopped carrying the kind of food that it should have carried. It was carrying sweets and sugar and that kind of thing for Ramadan, and then carrying some other commercial goods that we thought shouldn't be carried. The railroad seems to be a quasi-independent entity. It's a Government-owned operation within Sudan.

So we didn't, it wasn't moving as much food as we thought it should then. A few days ago, a key part of the track was washed out, rains have begun to come to Africa and to Sudan. The train track is now fixed; trains should begin to run, but we continue to strongly feel that we must rely upon that train track to carry 3 to 600 tons a day. It's just too far.

But in addition to that, we're now moving substantial food by truck; we and other donors, and there's some flying of planes out to that western area. The problems not at all solved by these augmented measures and indeed we are today looking at the possibilities of using some helicopters out in the far west to distribute within the west.

We haven't worked that out, and I'm not really prepared to announce the details of that, but I can tell you that throughout this crisis we've stopped at nothing. We've figured that we had to get the food there, and everyday was a new crisis, a new problem, but one that I'm just enormously pleased the staff has just produced extremely well, in figuring out most innovative answers.

There are other problems, but those were the main ones in the west. Problems in some ways that we've gotten less problems in Chad and Niger and Mali than we thought we might have. The Cameroon Government came through enormously well in the port situation in the west which isn't as bad as what we thought it was going to be.

There have been a number of situations where people have gone well beyond what we thought was going to happen, and we can be proud, I think, of what the American people and the Government have done, but just extremely proud of the people that we're working with and many of them who have done so magnificently too.

Now, having outlined these problems, it's important, I think, to say, as was said by a number of the speakers, members of the select committee; namely, that we've been able to get an enormous amount of food through. The facts are that the U.S. Government has spent, or will be spending this year, well over $1 billion on food, a good share of that for disaster assistance, disaster food. That when you take these 50-pound bags that much of our food goes over in, they're about that long, and you stretch them end on end, lay them end on end, and in fact, those bags will go around this globe at the equator more than twice.

An enormous amount of food that has been provided. The private response has been huge. The Live Aid people were here this week, so that we're going to be working with them. In that case, it looks like, they're going to be buying some trucks in Sudan, and work to haul our food.

We think a partnership like that is excellent, and I'm not used to sitting down with Rock Stars and talking about things, or the kind of thing my 14-year-old son gets excited about, but it was a very positive meeting and I found them deeply interested and committed, and frankly, helpful.

We didn't agree on everything, but that's the way it goes, and it was a productive discussion. And they went away with some concrete things in the works.

There was a comment a moment ago about the long-term effort, and I'd like to make 2 or 3 minutes of comments about this. I have been studying Africa now for many years and looking at these problems in great depth, and I feel strongly that this is not a continent of total desperation.

I think, in fact, it's important to look at India. A fair way to look at it, I believe. India in 1966 had a famine which effected substantially more people than this famine. This famine is probably the worst Africa's ever had, but in terms of people, the famine in India in 1966 was far worse.

Most of you remember that we spoke of India at that time as just an impossible place. It was never going to happen. Growing up, my mother used to say, why don't you eat this food, those poor starving people in India, what would they do if they had all this food before them.

Well, India today, after 20 or 25 years of great effort, is basically self-sufficient in grain production. It's enormous success in the history of the economy, that's one of the great successes of history. How did they do it?

Well, it was a combination of the Green Revolution, that miracle technology that produced the high yields in rice and wheat. It was the Indian Government saying that they were going to raise the prices of what the farmers were paid so that the farmers had an incentive. It was agriculture credits, it was help with fertilizer. Distribution, not necessarily free things, but distribution kinds of systems. It was the system of land grant universities that the USAID helped build, education extensions, training.

That kind of thing. A whole combination of efforts that piece by piece were put together and the U.S. Government had a major role in virtually every piece of it. It was founded, however, in a commitment on the part of the Indians to do the job for themselves. Their ultimate sovereignty would depend upon feeding themselves.

I can remember the President of Kenya not long ago saying to me, Mr. McPherson, what you must understand is my first duty is to feed my people. Well, I think that without that ability, no country has sovereignty, in my judgment, full sovereignty. Well, those same lessons, somewhat modified, of course, I believe are applicable to Africa. We need a Green Revolution for Africa. We now in Sudan have a sorghum that AID and others have worked to develop which produces 150 percent yield over traditional sorghum. Sorghum is the crop of the poor. Much of Sudan has sorghum.

We've got casaba to the western part of Africa, which produces yields of over 1,000 percent. It cannot be grown in many places, but in some places, it can. We're putting about $75 million a year into a Green Revolution for Africa, and that we need to stick at that. In 10 years, or less, we'll begin to see real differences. In 15 years, there's no reason, in my judgment, why you can't get a substantial additional yield.

We need to train more people. Africa is so devoid not of competent people, but of trained competent people. It's hard to work in Africa with our projects, if you don't have people to do the projects.

And we need the African governments to change their policies to pay the farmers more, and that includes the Ethiopian Government. The Ethiopian Government is willing to pay their farmers more for what they produce, and in effect, stop discriminating against their poor farmers, and that's true, not just in Ethiopia, but in some other parts of Africa, you can't expect the farmers to produce.

Those farmers from South Dakota and other places appreciate getting paid for what they work for, and everybody in the world does. The old adage about I know farmers that can't read and write, but I don't know any that can't add. That is absolutely true the world over.

Ladies and gentlemen, it's nice to be here.

Thank you for your time and attention.

RESPONSES TO QUESTIONS FOR M. PETER MCPHERSON

QUESTIONS SUBMITTED BY HON. MICKEY LELAND

Question. From the beginning of this crisis the needs have exceeded projections, events have been beyond our contingency planning. Failure to anticipate requirements, such as transport to Western Sudan, may mean death for thousands of people. What is AID doing to assess the comprehensive needs—food, shelter, transport, health, seeds, water—of these millions of famine victims across the continent? I am not referring to a particular need, but to an effort to determine a broad plan of action. Do you know what the major activities will be 3 or 6 months from today?

Answer. Individual country arrangements for assessing needs have varied depending upon the willingness of the host government to work with the donor community. The world community, both the United States and other nations, has provided the most comprehensive emergency response to famine in the history of Africa. Emergency food shipments to sub-Saharan Africa this year have exceeded emergency shipments in a normal year by ten times. This extraordinary response was based on the early warning information that was available during last year's growing season. Unfortunately, the preparedness in recipient countries has been less than we hoped for. Civil strife, long simmering regional and tribal conflicts, and inefficiency have hindered the delivery of food and emergency supplies, as well as other needs assessments.

In the year ahead, the U.S. Government, AID, and the donor community will continue to monitor the sub-Saharan African situation. Certainly our assistance has been extraordinary to date, and we are prepared to make future emergency assistance—including food, shelter, transport, seeds, water and health assistance—available if necessary.

Question. The record shows a reluctance, not an eagerness, to seek the funding required to adequately respond to this tragedy. The administration's supplemental request last winter was clearly not based on an accurate assessment of need or a determination to meet that need regardless of the total amount. Now, the crisis continues—worse in certain areas. Will AID be prepared to speak loudly, clearly, and quickly enough concerning additional funding requirements for our famine response?

Answer. I disagree strongly with your statement the administration has been reluctant to seek adequate funding to respond to this tragedy. The supplemental request last winter, which was developed in the fall of 1984, was based on a careful analysis of the situation at that time and was for the actual and perceived needs for the remainder of fiscal year 1985. The supplemental funds appropriated by the Congress are available for fiscal years 1985 and 1986, of course, a much longer period. Let there be no mistake, however, in my position on seeking additional funds. Should I believe AID's emergency response needs more money than has been appropriated, I am prepared to recommend that additional funds be considered.

QUESTIONS SUBMITTED BY HON. TONY P. HALL

Question. Much of the discussion here has been on unmet emergency health requirements of the famine victims. We have heard that UNICEF alone has identified $32 million worth of health projects requiring funding. What is the level of health projects identified by AID as requiring funding in the next few months? What is the anticipated scope of your emergency health programs between now and perhaps the end of the year?

How are you meeting emergency water requirements of these victims? What is the scope of your emergency water programs for camp residents?

Answer. To date, we have obligated $10 million for health, water, and sanitation activities in drought affected countries as detailed in the attached summary for fiscal year 1985. Congressional notifications totaling almost $25 million, as of August 21, in these same categories are listed in the second attachment, which leaves about $15 million of currently planned support for the near term. You will note that a significant amount of funding is provided for UNICEF and based on our field mission endorsement, an additional $4 million support package for UNICEF activities in Sudan is currently in process. The exact level of our future support in this area will be largely dependent upon needs as identified by our United States staff working in close association with host governments, private voluntary organizations, and the U.N. system and is difficult to determine at this time. We will continue to encourage and support all activities in this very important area when they can be determined to be appropriate for helping the tragic famine victims.

It should be noted major international assistance is given to refugees and drought victims who have crossed borders by the United Nations High Commission on Refugees (UNHCR) and a number of private voluntary organizations. This aid includes a large component of medical and water supply assistance. Over 1 million such persons are now assisted in Sudan alone. The Department of State Bureau of Refugee Programs regularly funds approximately 30 percent of UNHCR's budget for such expenditures. U.S. contributions for UNHCR activities in Africa total $52.5 million for this year to date.

AFRICA DROUGHT—HEALTH, WATER, AND SANITATION EMERGENCY ASSISTANCE—FISCAL YEAR 1985

Country	Assistance	Dollar amount
Burkina Faso	Air freight of pumps and pipe	$35,121
	Purchase of water pumps (3) and pipe	46,213
	Medical supplies from UNICEF and US Trading Co	[1] 69,210
	TDY WASH water engineer (1 month) and dam construction engineer (9 month).	125,000
	Grant to GOS for dam/spillway repairs	1,150,000
Total		1,425,544
Chad	Ambassador's authorization used for grant to Africare	25,000
	Local purchase two vehicles—Immunization program	40,000
	CDC health team TDY—90 days	21,790
	HHS immunization team TDY 10 weeks	44,594
	CDC immunization team's local support	13,365
	TDY sanitary engineer—L. Strain, HHS	28,715
Total		173,464
Ethiopia	Grant to WVRO Emergency Water/Medical Relief Program	1,597,640

AFRICA DROUGHT—HEALTH, WATER, AND SANITATION EMERGENCY ASSISTANCE—FISCAL YEAR 1985—Continued

Country	Assistance	Dollar amount
	Grant to ADRA for Emergency Relief Program—medical component.	72,000
	MAP reimbursement transport costs of medicines (value: $1.5 million).	71,000
	Grant to Food for the Hungry (FHI)—five feeding centers.	683,297
	WVRO—operating costs for five nutritional/health centers.	2,108,026
	UNICEF reimbursement for airlift of medical supplies (cholera).	52,978
	HHS-TDY of nutritional assessment team-4 weeks	9,540
	Grant to Helen Keller (HKI) for Blindness Prevention Program.	34,083
	UNICEF grant for Water Drilling Program	750,000
	WVRO Reimbursement of air freight costs—ORH packets	23,427
	Contract to replace four 3,000 gallon water tanks	9,188
	Africare grant for voluntary medical teams	300,000
Total		5,711,179
Guinea	Pre-disaster declaration nutrition assessment by CDC	15,180
Total		15,180
Mali	Cholera-medical supplies and CDC team	24,975
	Cholera supplies from Fisher Lab	11,973
	Support of GOM Accelerated Cholera Program	[1] 100,000
	Koro Circle Self-Help Wells Program (mission)	36,000
Total		172,948
Niger	Nutrition assessment by CDC	10,532
	Armbands (2,000) from U.S.	1,075
Total		11,607
Somalia	Ambassador's authority	25,000
	Airlift of medical supplies	84,000
	TDY of DOD medical team	15,000
	2,010 5-gallons water jugs	5,000
	Contract to replace eight 3,000-gallons water tanks	18,376
Total		147,376
Sundan	TDY of two DOD medical technicians (90 days)	27,000
	Grant to Helen Keller (HKI) for Blindness Prevention Program.	42,739
	UNIPAC-medical supplies and transport	[1] 367,394
	TB syringes, needles, and transport	[1] 6,121
	Liquid crystal thermometers	[1] 425
	Freeze watch indicators	[1] 1,105
	Miscellaneous drugs	[1] 3,915
	Streptomycin and penicillin	[1] 170,500
	UNICEF—contribution to appeal for water project	400,000
	Contract to replace 76 3,000-gallons, water tanks	174,572
	Airlift of medical supplies	33,334
Total		150,000
Africa Regional	WASH contract amendment for water-related technical assistance.	150,000
	WASH contract amendment for water-related technical assistance.	[1] 285,000
	Tulane University contract for Famine Early Warning System (FEWS).	[1] 1,063,313

AFRICA DROUGHT—HEALTH, WATER, AND SANITATION EMERGENCY ASSISTANCE—FISCAL YEAR 1985—Continued

Country	Assistance	Dollar amount
Total		1,498,313
Grand total		10,382,716

[1] Supplemental appropriation

FISCAL YEAR 1985 SUPPLEMENTAL APPROPRIATIONS FOR FAMINE RELIEF IN AFRICA—HEALTH, WATER, AND SANITATION ASSISTANCE APPROVED IN CONGRESSIONAL NOTIFICATIONS 1, 2, 3, 4, AND 5

Country	Assistance	Dollar amount
Africa-general	AID and various MOH's—cholera response (Ethiopia-Sudan-Mali).	$1,500,000
	AID and various MOH's—immunization program (measles, meningitis, and other communicable diseases).	300,000
	CDC—medical personnel	450,000
	AID and various MOH's—Vitamin A program (not Ethiopia or Sudan).	250,000
	UNICEF and various MOH's—airlifts of medical supplies	210,000
	CDC—nutritional surveys	300,000
	WASH—health and sanitation technical assistance	285,000
	Contingency for airlifts of medical supplies and food (at cost of $90,000 each).	360,000
	Tulane University—Famine Early Warning System (FEWS), demographic and health reporting tracking system (Ethiopia, Sudan, Chad, Mali, Mauritania, Niger, Mozambique).	1,500,000
Total		5,155,000
Burkina Faso	Rubberized water tanks for LORCS centers	350,000
	Water rehabilitation GOB-AID/private contractors	2,000,000
Total		2,350,000
Chad	AID/Ndjamena and GOS-MOH—medical supplies	300,000
	Repair of 75 Peace Corps wells—DMS	506,000
Total		806,000
Ethiopia	Africare—medical teams	354,413
	WVRO—to continue provision of food, water, and medical supplies to nine centers.	1,718,968
	UNICEF—relief and rehabilitation—water and health	1,800,000
Total		3,873,381
Mali	UNICEF—emergency relief and rehabilitation—health	1,000,000
	Activate Paysanne—small scale irrigation recovery project (Timbuktu)—Africare.	1,900,000
	USAID/Mali—small scale wells project	36,000
Total		2,936,000
Mauritania	USAID—water tank trucks (6)	1,001,000
Total		1,001,000
Mozambique	Emergency relief and rehabilitation—health—UNICEF	1,550,000
	UNICEF—rural water wells and logistics (Inhambane province).	3,250,000

FISCAL YEAR 1985 SUPPLEMENTAL APPROPRIATINS FOR FAMINE RELIEF IN AFRICA—HEALTH, WATER, AND SANITATION ASSISTANCE APPROVED IN CONGRESSIONAL NOTIFICATIONS 1, 2, 3, 4, AND 5—Continued

Country	Assistance	Dollar amount
Total		4,800,000
Niger	CARE—emergency health program	281,153
	Emergency relief and rehabilitation—health—UNICEF	1,000,000
	Water drilling supply—UNICEF	1,000,000
Total		2,281,153
Sudan	AID/Khartoum and GOS-MOH—medical supplies for western Sudan.	450,000
	AID/Khartoum and GOS-MOH—medical supplies	300,000
	Cholera prevention support	800,000
Total		1,550,000
Zaire	Emergency medical teams	72,000
Total		72,000
Grand total		24,824,534

Question. Can you explain why, during this emergency crisis, there are several vacant health officer positions in AID missions in famine-stricken African countries. The health officer slot in the Sudan, for example, is vacant. Why?

Answer. Our records do not support the contention that there are several vacant health officer positions in the AID missions in the famine-stricken countries in Africa. The previous health development officer in Sudan departed in May 1985, at the end of her tour, and her replacement arrived in June 1985, with no significant lapse in coverage. The new health development officer, Dr. James Sarn, is a very well qualified senior Foreign Service officer and a medical doctor, who had previously served as the Agency Director for Health and Population. In addition to Dr. Sarn, the Sudan mission has a population development officer, and two outstanding international development interns who are qualified health-population officers.

As for the other drought-affected countries in Africa, the Agency has in place qualified health/population development officers as well. These include Kenya, Mauritania, Niger, Burkina Faso, Mali, and the Ivory Coast. In Ethiopia, we have covered the health consideraitons through use of Participating Agency Service Agreement (PASA) personnel, personal service contractors, and AID personnel on extended travel duty. This approach in Ethiopia has been due in large part to Ethiopian Government restrictions on the number of direct-hire AID officers permitted to work in the country.

AID will continue to ensure that top quality personnel are in place to assist in the drought-related programs in the Africa bureau.

QUESTIONS SUBMITTED BY HON. BYRON L. DORGAN

Question. A general Accounting Officer report of April 8, 1985 prepared at my request clearly documents major delays in the provision of emergency food aid to Ethiopia. What lessons has AID learned from the problems of the timeliness of food aid in this situation to improve the reponse system?

Answer. The GAO report documented delays in approval of certain voluntary agency requests for emergency food aid for Ethiopia in fiscal year 1983 and fiscal year 1984, not to the current year's operation. Based on the experience of prior years, AID during fiscal year 1985 has:

reduced the time to review and approve PVO requests;

improved coordination of food aid donors at the country level;

increased AID staffing in-country to facilitate program planning, implementation and monitoring;

maintained the flow of commodities to Ethiopia consistent with the country's ability to unload and transport commodities; and improved the timely presentation of information necessary to determine emergency food requirements.

Question. Can you comment more specifically on the Office of Management and Budget deferral request for the expenditure of disaster assistance funds. This has been referred to as an error. Does this deferral request reflect OMB's role in the interagency process as being one of interfering and delaying requests for emergency food and nonfood asssitance?

Answer. OMB's deferral request on the expenditure of disaster assistance funds was not an error. The deferral was part of the standard special message to Congress on deferrals and rescissions of funds which is required by legislation for funds which are available but not yet ready for obligation. The administration has moved quickly in providing historically large amounts of drought relief to Africa, while ensuring effective use of U.S. assistance.

The African Famine Relief Act requires that country-specific plans be developed and approved by the AID Administrator before funds can be expended. OMB included the disaster assistance funds in the deferral notice because country plans had not been approved at the time the special message was prepared. However, as country plans were approved, and as program resources were requested, funds previously reported as deferred in the special message became available for obligation.

Question. I remain curious on the lack of data available concerning the victims of this horrible famine. The United Nations Office of Emergency Operations in Africa estimates that 150 million people are affected by the famine and 30 million lives are in jeopardy. Do these numbers agree with your own best estimates?

Answer. Over the past crop year, U.S. food assistance has fed millions of people in Africa. We are currently feeding over 5 million people in Ethiopia and more than 7 million people in Sudan alone. When U.S. food assistance is combined with other donor assistance, it is quite possible that over 30 million people in sub-Saharan Africa have received long-term food assistance. One should keep in mind that our fiscal year 1985 emergency food aid assistance is three times fiscal year 1984 and ten times fiscal year 1983.

Additionally, we believe that the projection of 150 million people as being affected by the famine at one time or another during this current crop year could be substantiated.

However, an accurate assessment of those affected is made difficult by the fact that information is very hard to obtain in most countries of sub-Saharan Africa; valid information in critical years is even more elusive.

QUESTIONS SUBMITTED BY HON. TED WEISS

Question. The legislation authorizing the supplemental appropriation for famine relief and recovery for African countries severely affected by the drought required that a report be submitted by the President to the Congress by June 30 of this year. I have here the report that was submitted. The legislation required that the report describe:

"emergency needs, including food needs" identified by the President's Task Force on the African Food Emergency, PVO's, the U.N. Office for Emergency Operations in Africa, FAO, and other agencies.

"the projected fiscal year 1985 contribution by the U.S. Government to meet an appropriate share of those needs * * *"

It was the expectation of the Congress that the report contain information concerning the amount of money spent from the supplemental appropriation, for food and for disaster assistance, and the type of disaster assistance it was, as well as the remaining need for food and disaster assistance for the rest of fiscal year 1985.

The report itself is short—just over 13 pages. But the report does not really answer the questions adequately. In order to get the answers, one must burrow through two-and-a-half inches of xeroxed appendices. Would you please provide me with clear and concise written answers to these questions:

How much of the funds from the supplemental appropriation have been spent for disaster assistance to date?

Answer. Of the $135 million provided to the Office of U.S. Foreign Disaster Assistance (OFDA) from the special supplemental appropriation, AID has notified Congress of its intent to obligate approximately $82.6 million.

Of this amount, $48.5 million has actually been obligated.

Question. What have these disaster assistance funds been used for?

Answer. To date, the Office of U.S. Foreign Disaster Assistance has obligated $48.5 million. This money has been used for the following, thought not all inclusive list of activities:

Emergency experts and medical personnel; nonmedical supplies (tents, cots, utensils, water tanks); truck purchases, leases, spare parts; airlifts; and railroad locomotives and spare parts.

OFDA transferred $5 million to the Bureau for Food for Peace and Voluntary Assistance for use in PVO ocean freight reimbursement program. AID provides much of its disaster assistance funds through private and voluntary organizations.

Question. Why has such a large proportion been spent on transport when (1) there is a separate appropriation of "up to $100 million" in Public Law 480 title II specifically earmarked for internal transport? and (2) the U.N. Office for Emergency Operations in Africa reports that selected emergency projects requiring immediate action for only the eight most seriously hit countries total $184.6 million—most of which is not for transport?

Answer. Transport has proven to be a costly obstacle to assuring full impact of our food. Title II transport funds can only be used for title II commodities. OFDA has had to spend funds on transport when trucks, trains, or airplanes were not carrying Public Law 480 title II foods exclusively. In spite of this contribution, demand for assistance in transporting Public Law 480 title II foods has been so great that over $70 million of the $100 million available has been approved. We have had to actively draw down from both accounts, treating neither as a reserve, to meet the requirements associated with getting the food out.

The U.N. Office for Emergency Operations in Africa has provided an important service in identifying emergency needs for the eight most seriously affected African countries. As you know, the majority of these were in the area of health and water. Providing health and water services requires a grass roots infrastructure heavy in donor technical assistance that only private voluntary organizations or international organizations can provide. AID depends on these groups for the implementation of its emergency response in health and water. Without them, our emergency response is limited. In spite of the fact that these groups have expanded dramatically to fill the needs in Africa, they are still limited relative to the complexities and scale of managing their priority food relief programs. We believe that they simply have not had the wherewithal to design and submit the additional complementary activities that OEOA has identified. They and we are aware of the emergency needs that remain unmet. However, our funding in this area directly reflects the quantity of proposals we have received.

Question. It was the intention of the Congress that, in the use of disaster assistance funds, emphasis be placed on agricultural inputs (seeds, farm implements, pesticides, fertilizer, farming animals); health, water, and sanitation projects; and relief and survival items. Why have these necessities for a return to farming and improved health not been funded at higher levels?

Answer. AID recognized early-on that the response to the African drought would require an emergency response as well as a longer term rehabilitation and recovery response. To date, the disaster assistance funds have largely been used to address emergency needs.

To a great degree, AID utilizes private and voluntary organizations (PVO's) to carry out emergency as well as recovery programs in Africa. To date, the PVO's have concentrated their response primarily on emergency activities. AID has set up guidelines for recovery projects and has encouraged the PVO community to submit responsive proposals. As the immediacy of the emergency phase lessens, we anticipate additional funds being provided for recovery projects. AID's first priority has been to get the food to the people that need it.

For the months between the end of the fiscal year through March 31, 1986, we project that a sufficient amount of the $135 million supplemental will be available for recovery needs. Section 6 of the African Famine Relief and Recovery Act of 1985 instructs AID to report more precisely on this matter no later than September 30. Therefore, greater discussion on this important subject shall be provided in the near future.

Question. Based on reports on relief and recovery needs from AID field staff, the U.N. Office for Emergency Operation in Africa, and other sources, will the Office of U.S. Foreign Disaster Assistance in AID have enough funds remaining to meet "an appropriate share" of those needs through the remainder of fiscal year 1985? And what about the months between the end of the fiscal year through March 31, 1986, which was the period the disaster assistance funds in the supplemental were appropriated for? Will an additional supplemental be needed in your opinion? What is your definition of an "appropriate share" of disaster assistance? If you found that OFDA needs additional funds, what action will you take?

Answer. Based on our field information, we believe we will have enough funds to cover needs through the remainder of fiscal year 1985. On October 1, 1985, with the beginning of the new fiscal year, OFDA will have available its annual budget of $25 million and its borrowing authority of $50 million, which, if needed, could be made available for emergency assistance.

We do not believe at this time that an additional supplemental will be required. If, an additional information and requests come in from the field, we find additional funds are needed, I am prepared to recommend them.

QUESTIONS SUBMITTED BY HON. MARGE ROUKEMA

Question. On July 25 you recounted your efforts to bring 100 trucks from Keyna, with drivers, into Ethiopia to augment the delivery of famine relief. What does that effort stand now? Does the Ethiopian Government continue to object to the use of these vehicles for emergency purposes?

Answer. Agreement has now been reached on the leasing of trucks from Keyna to work in Ethiopia for at least 6 months. The Ethiopians have now undertaken to provide drivers to operate these vehicles for service in the emergency relief effort. The earlier plan to bring the trucks overland was changed when it was agreed that Ethiopian rather than Kenyan drivers would be used.The trucks are now at Keyna's port of Mombasa ready to be shipped to Assab, where they will at once begin moving relief carge from that port.

Question. What agreement do you have with Bob Geldof and the Live-Aid people to work jointly on the African famine? What joint projects or cooperation do you anticipate?

Answer. Shortly after the Live-Aid concert, AID staff and I met with Messrs. Goldof and Jenden to discuss how we might cooperate. Our discussions have continued on a regular basis and we are working together to help resolve the enormous problems confronting Africa. AID has already agreed to provide food aid and operational support to Live-Aid programs in Sudan and Ethiopia on a cofinancing basis.

Question. Does AID have efforts similar to your one with Live-Aid with other private groups?

Answer. Almost all of our other assistance efforts with private groups support the groups' implementation of a specific relief program. Live-Aid is different in that AID may cofinance a Live-Aid activity to be implemented through another organization. We have held numerous discussions about the situation in Africa with USA for Africa. They might decide at some time in the future to approach AID for cofinancing of projects. AID would, of course, be pleased to discuss such requests.

Question. Is it true that Nigeria has closed its roads to emergency relief shipments bound for those in danger of starvation in land-locked countries on its borders? Why? What, if anything, has the administration done to reverse this decision?

Answer. Nigeria has directed that emergency relief shipments to be transshipped to landlocked countries be delivered principally to Calabar and Port Harcourt; if these ports were found to be insufficient, the Nigerian Government would consider allowing food to pass through Lagos. The Government of Nigeria was concerned that food transshipments through Lagos might interfere with the smooth handling of crucial and previously scheduled fertilizer deliveries.

The U.S. Government has shipped massive quantities of grain through Port Harcourt and Calabar to Niger. Official U.S. shipments of grain for Chad primarily passed through Douala, the principal port of Cameroon. The World Food Program shipped food for Niger and Chad through Nigeria during this period; the bulk of their food destined for Chad also passed through Douala.

Question. What agreements do we have with countries receiving our aid to assure the free entry of our shipments without unreasonable charges for docking, duties, unloading, and transportation? Please provide these agreements for Ethiopia, Sudan, Chad, and Niger.

Answer. All Public Law 480 title II programs are carried out in accordance with the provisions of AID regulation 11. The regulations stipulate duty free entry and tax exemption for the programs. These conditions are reflected in the attached transfer agreements for the countries requested, that is, Ethiopia, Sudan, Chad, and Niger. A copy of regulation 11 is also attached.

[Material submitted by Mr. McPherson retained in committee files.]

Question. What effect do U.S. cargo preference provisions have on the price of transporting American grain and supplies to Africa for famine relief?

Answer. AID's current policy on cargo preference is that: Under Public Law 480 title I, one-half of each program agreement must be shipped on U.S. flag vessels. Under Public Law 480 title II, an absolute 50 percent of all title II cargo will be shipped on U.S. flag vessels on a calendar year basis.

Public Law 480 title II compliance with cargo preference has not impeded delivery of cargo for the African food crisis, though it has increased the cost of food aid shipments. The USDA estimates that the additional cost of cargo preference compliance under title II is more than $47 million to date in calendar year 1985. An important part of these cost are the relatively expensive shipping rates to East Africa, a major recipient of U.S. emergency food aid this year. Title I compliance is estimated to cost $90 million for a total additional cost to the program of $137 million in calendar year 1985. If cargo preference was not mandated, approximately 350,000 additional metric tons of cargo could be delivered based on an average delivered cost of $385 per ton of grain. If this cargo were all grain it could feed nearly 8.5 million people for 3 months.

Question. Would you comment on the latest allegations of a second forced evacuation of the Ibnet refugee camp? What is the present situation at Ibnet?

Answer. The camp at Ibnet, which was cleared by force April 28-29, was reopened after a general protest from the world community, and its population quickly rose to an estimate 70,000-80,000. During the past 2 months this population was returned home in a more orderly manner. Drought victims were sent off in family groups, each provided with food, seed, and hand tools for cultivation. Despite our concern that the government might try to force movement too rapidly for relief supplies to be provided to all those in need, the relief workers and U.N. observers at Ibnet have advised us that this did not happen. At present Ibnet remains open for a small population of 5,000-6,000 drought victims who are too sick or inform to be sent home. Newly arrived drought victims are being taken in by other camps rather than by Ibnet.

Question. The Hunger Committee is charged to report to the Congress on the issues of hunger and nutrition. Has AID generated or received recommendations that you can share for the committee's consideration?

Answer. AID has submitted a June 30 progress report on the African famine to the Congress and a second report is due September 30, 1985. Both reports contain suggestions and recommendations by AID, international and private and voluntary organizations.

In addition, the staffs of AID and the Select Committee on Hunger exchange information, suggestions, and recommendations on a regular basis.

[The prepared statement of Mr. McPherson appears at the conclusion of the hearing, see p. 76.]

Mr. HALL. Thank you for your statement, Mr. McPherson.

The first question I'd like to ask is a basic one. Do you anticipate asking for more funds from Congress?

Mr. MCPHERSON. At this time, we don't, but we have never been shy in proceeding along those bases, if the need, if we think the need is there.

Now, let me review the figures just a bit here, Mr. Chairman, if I can. What we've gotten done. Now, we had $400 million plus the present reserve of $225 million. We have spent, we have obligated to date—it's not all expended but it's obligated—$225 million. Thus, the balance of $175 million left for that we would expect to spend before the end of this calendar year.

Now we have, as well, that $225 million reserve which we would be able to dip in, and we've proven, I think, a great dexterity with section 416 and of course, you remember that's the placing mechanism for use of the CCC. There is, in short, a substantial amount of food tapping that we can undertake.

Now, the tighter funds are in the disaster assistance funds. Where we have spent about $100 million of those disaster assistance funds, we have $35 million left at the beginning of next fiscal year, I will have $25 million more from my regular account; I will have the authority to transfer from other of these, $50 million more. We think there's a decent amount of flexibility here.

I should point out that the disaster assistance moneys have sometimes been used for transportation. We have spent $55 million of the $100 million set aside from the food in title II. Maybe I'm going too fast in these figures. Am I covering it right?

We've spent $55 million from the $100 million from the title II so far this fiscal year, we would expect that we would continue to spend money for that for transportation and all in all, at this hour, I think there is a fair amount of flexibility, but I have not hesitated to spend money on this drought. We've gone through this money fairly rapidly in the opinion of some, and I expect to continue, when I've got a problem, like possible helicopters in Western Sudan, to spend the money.

Mr. **Hall**. I'm concerned about your agency's flexibility. I'm concerned about the Office of Management and Budget trying to put a hold on some of these disaster relief funds. I'm concerned that we're not meeting emergency health needs. We are not meeting the additional requirements that complement our food assistance. I don't think that there's any question that the U.S Government has met its responsibility in providing food assistance. It's been a tremendous response.

I think we now need to focus on the nonfood items. And I am concerned that we're not meeting the additional needs over there—the needs that are being identified by the private voluntary groups. Specifically, requirements relating to immunization and health are not being accorded enough attention.

I would like for you to address these concerns.

Mr. **McPherson**. Well, something that I have spent some amount of time on and it's certainly true that I often feel like there's some additional medical care and treatment that might be provided. However, I think we need to keep squarely in mind that what people need the most in Africa—the biggest help measure we can provide for Africa is food.

The people are dying and will unfortunately die throughout this time because of logistical and other problems, in large part, because they don't have enough food, so that the emphasis needs to continue to be upon food. I say, for example, your communicable disease center testifier today, who says in his statement, in summer, the highest priority emergency health requirements identified during the current crisis has been, in my opinion, the provision of food and supplementary and therapeutic feeding.

He mentions measles immunization, vitamin A, and oral rehydration, but it's clear, when you look at his statement, that the highest priority is food. Now, that ought to be not just raw grains. It ought to be in camps, that kind of sort that emergency food. It's a marvelous thing. I've seen kids brought into camps that are nothing but shriveled up little men and women, and you can feed them half dozen times a day, this enriched almost souplike thing, like food, every few hours, and in a week, they'll be much better. Interesting to bring back the pictures from Ethiopia to show the President, and just 1 week's time, we could show him what the food did. Having said that, I know you appreciate that, we have been able to provide fairly broadly and effectively, I think, oral rehydration therapy. You recall the oral rehydration, it deals with diarrhea, and with dehydration, and just a handful of sugar, a pinch of salt, and a quart of water, fed spoon by spoon, is enormously helpful in saving lives of kids.

It's fairly easy to distribute. Packets are little. We've been able to get around there quite well. We've done immunizations, particularly for measles, that have periodically been problems in camps in Somalia, and in Ethiopia, in Sudan, particularly the cross-border camps there in Sudan. We've done that when a problem arose and there was sort of an emergency that we thought we ought to get ahead of.

Logistics of getting all that done, combined with getting our food moved, has met some restrictions. In short, we provided I guess about a total of $10 million in health money this year, or obligated that much. I would like to do more but I think that we need to keep our eye on the ball of moving that food.

On the other hand, there's, of course, areas where people can have a difference of view, but I believe that at least so far in this crisis, our focus on moving the food and a lesser focus, but still, $10 million is not little, on health, per se. Now, I would suggest, Mr. Chairman, that in the months ahead, the chances are pretty good that we're going to build more effort into immunization into health.

I say that because I have reasonable hopes that in the few months, we're going to have harvest—I don't suggest that they are going to take care of the problem—but harvests that are substantial, that will help feed people, and make it easier for us to deal with the feeding problem, and we can perhaps shift some of the focus.

The whole situation in these countries is that we have tried to put into a 5-pound bag, sort of 100 pounds of potatoes, and the logistical problems of doing this are just enormous. Often I find there's a tradeoff between providing one kind of care with providing another, and we have fundamentally opted to push food as hard as we could.

Mr. HALL. I know that the major problem is food. And again, I say, the response has been overwhelming; it's something that we should be most proud of. But our concern today is the nonfood area. I'll state again, it doesn't do us any good to bring the food in if it stays on the dock due to lack of transport.

It doesn't do us any good to continue to bring food to camps if there are outbreaks of measles that are killing these children in tremendous numbers. I'm concerned about a catastrophic area that's perhaps worse than Ethiopia, and that's western Sudan. The fact is that the railroad we are depending on is sometimes not reliable.

What are we doing about these kinds of problems? How are we, for example, addressing the problem of the railroads in Sudan? Are we joining with the other Western nations to solve that problem?

Mr. MCPHERSON. Let me take those items, one by one, if I can, Mr. Chairman.

First of all, we think that food sitting on docks doesn't help anybody. It's true that maybe 75 percent of the food that's been delivered by us to Africa has actually gone through the ports and gone on, in most cases, probably to feed people with relatively little leakage, but still the plus 100,000 tons of food in ports in Ethiopia, and substantial food in ports in Sudan isn't doing the job, and we work every day on how to get more trucks for Ethiopia, or whatever to solve the problem in Sudan.

Food in ports is not enough and we totally agree, and I spend a lot of my time struggling on that issue. In terms of measles epidemics, we have been able to respond reasonably successfully to these epidemics, really got ahead of the curve usually, like in western Sudan—excuse me—eastern Sudan, Ethiopia, and down in Somalia, and so forth.

You've got to provide immunizations for measles in a crash basis and we've always given that priority. I think in fact we've used U.S. Air Force planes to fly immunizations into eastern Sudan and sometime, a few months ago, when we thought there was an epidemic and that got hold of it, frankly.

That was a situation where, in fact that was a time when I went to the President on a Thursday afternoon and said, we've got to get measle immunizations into Sudan, and we've got to get some food. And he said, fine. And we on Friday we had an order placed on Saturday, we had planes from Europe with immunizations on them, U.S. Air Force planes.

Now, Sudan, western Sudan, should I answer this at some length, because this is a problem of some difficulty, I think.

Mr. **Hall**. The Sudan is certainly a concern of our committee when we hear there's such a major problem there, a worse situation than in any of the other countries now. Even worse than Ethiopia in some aspects.

Mr. **McPherson**. I don't really think it would be viewed as worse. I mean, I think what you've got in northern Ethiopia is just as bad as anyplace. We have more we can get into western Sudan easier. We, the West and our press, know a lot more about western Sudan which is why we're going to be more able probably to deal with it.

But it is a huge problem, and let me describe how we're dealing with it.

We have felt all along that we had to use the railroad as a principal source to transport food. It just took too long to do anything else. We have put into that railroad 3 million dollars' worth of parts to keep things going. We now have the Corps of Engineers people on the way to help with repairs as problems occur. This is supplementing some other people that are already there.

We have bought eight locomotives for $10 million that will arrive in a few days to supplement what is there. We think there's a reasonable opportunity that we're going to get between 3 and hopefully as much as between 300 to 600 tons a day moving by that train. We estimate it will take about 500 tons a day to prevent massive starvation.

We would figure it would take 1,300 to 1,400 tons to feed what needs to be done, but a minimum of 500 or so tons needs to be moved, absolute minimum, in our judgment.

Mrs. **Roukema**. Excuse me, Mr. McPherson, what you're speaking of now goes to one of my questions. With the chairman's permission, I'd just like to ask you about the railroad situation. There have been reports and allegations that the railroad cannot be repaired easily.

I assume what you're saying is that you have confidence it will be repaired in time; and that the breakdown of government management and the possibility of extortionist methods by local officials, will not be an impediment to your delivery of food?

Mr. McPherson. We have reasonable confidence, but our judgment to use the railroad is bolstered by our feeling that we don't have a lot of options. It is over 700 miles. The road is treacherous and difficult, particularly now that it's raining, parts of the road get washed out and it can be as much as a 6-week round trip by truck.

We don't think we've got a lot of options but to try to put money and effort into making that train go. Now, I'm not suggesting that the train's going to do the trick. What we really wanted was to have a bunch of food stored in Nyella by the beginning of the rainy season, a couple weeks ago.

And that effort got sidetracked when the train didn't, simply didn't, haul the food it was supposed to haul. So, I want to rely upon it, but I don't sort of have 100 percent faith. Having said that, how do we, what are the other options. How else can we bolster this.

Well, the world is now along with us providing substantial trucks. Again, this is not going to be easy. If trucks were the answer, we probably would have done that earlier, because we can control trucks a lot better than a railroad that with all the difficulties. We've leased 100 desert rigs. These are ones with big tires like this to use for this route.

We have, we're talking about leasing a couple hundred more trucks that we would bring in from outside the country; 550 desert-type trucks are being provided by other donors. That are in the pipeline.

What happens is that you bring them into Port Sudan, and then you truck a load full of food down to Port Sudan, that's way up in the north, it's hundreds of miles down to Kosti, and then you truck them all across the country.

Now, the third problem to this attack is aircraft. The EEC is operating seven C-130's, and most of those are military C-130's of those governments, and they are in effect being used to train and supplement their programs, so apparently, it works out quite well for them. We are in the process of looking at—remember C-130's carry a maximum 18 tons, and probably less than that because if we carry too much, we tear up the airports on the other end.

We probably don't have the airport capacity, the ability to put the planes in back and forth, without regard to the cost. This 5-pound bag is bursting at all its seams. Now, we've got a problem not only in delivering the food to the west; we've got a problem with distribution of food, with the rains, it's become extremely difficult, and it is for that reason, that we're looking at some helicopters to use within the western region.

The helicopters of course, they carry almost nothing, just a few tons, can in fact get food into places that are absolutely isolated by the rains.

Mr. Hall. Thank you, Mr. McPherson. Did you have further questions, Mrs. Roukema?

Mrs. Roukema. Yes. I do.

Mr. McPherson, I do want to repeat what I stated at the opening of this hearing, that we are most appreciative for your leadership and your diligence. I think you have operated in an exemplary manner in the face of enormous difficulties.

I don't think the American public has any idea, as we in the Congress do, of the obstacles you're dealing with, both in terms of local governments and in terms of the infrastructure and logistical problems.

I want you to understand our appreciation.

Mr. McPHERSON. Thank you.

Mrs. ROUKEMA. I do have some concerns, however. You have stated today, as I understand your testimony, that you feel reasonably assured that through the good offices of many people, probably including the United Nations and Mr. Kurt Jansson, although you didn't mention him by name, but certainly through Catholic Relief Services, and World Vision, and others, that safe passage may be accorded or at least—you don't want to call it safe passage.

Mr. McPHERSON. They don't like to call it——

Mrs. ROUKEMA. No; I know that Ethiopia doesn't like to call it safe passage, but you are reasonably assured that trucks are going to be permitted to get into the northern provinces now, with the sufferance of the Ethiopian Government, is that correct?

Mr. McPHERSON. That's a little stronger statement than I would make. Let me say, with a little bit more manner, that I might, if—— ——

Mrs. ROUKEMA. Care. All right.

Mr. McPHERSON. The Ethiopian Government takes the official position that they are willing to let us deliver food wherever people are in need. That, however, has been subject to the limitation that there are many areas which they argued it wasn't safe or practical to move into.

Now, what they are saying now is that some of the areas bordering where we previously had worked, it is now practical to move food into those areas, and so we're not, the whole north isn't open to us; it is certain cities, certain little villages, or towns, within an area that previously we weren't getting food, that we are now moving food, and of course, that we're now hoping to move food.

Mrs. ROUKEMA. You and I have discussed this issue previously, and you know of my intense interest and the interest of this committee, in doing whatever we can to improve the situation. Is there anything beyond what we are presently doing that can be done to influence the situation? I do know that when Mr. Kurt Janson visited Ethiopia recently, there was some progress made.

It seems to me that there should be something that we can do, not only in terms of truly guranteeing safe passage. For instance, you mentioned the Kenyan trucks that you are prohibited from bringing into Ethiopia. What can we, either in the Congress, or through the United Nations or by whatever means necessary, do to help the Ethiopian Government understand that the frustration level of the American people does reach a limit.

Our generosity has no limit, but there is a limit to the frustration we will tolerate. I think our frustration level was exhibited, in my opinion, unfortunately, with Mr. Roth's proposed amendment to the Foreign Assistance Act, a week or so ago. Nevertheless, that's an indication of the frustration level of the American people. Fortunately, I think Mr. Solarz was able to work out what was a reasonable compromise, but does Congress have to talk tough before the Ethiopian Government understands that there's a limit to our patience?

Mr. McPHERSON. Well, I think we can't be easy on them. I think that we really have to say what our problems are, publicly, after we've exhausted our private remedies, and that's——

Mrs. ROUKEMA. Have you exhausted your private remedies with respect to these trucks?

Mr. McPHERSON. We talked a lot about it in Ethiopia, and we have not yet got our trucks, so we're here talking about it.

Mrs. ROUKEMA. Well, we'd like to do what we can to help.

Mr. McPHERSON. I thank you and your meeting with your session today and the discussion about it, I think in fact makes the point. My hope is, it makes the point not only about those 100 trucks, but it makes the point that we need more trucks from the Ethiopian Government.

Mrs. ROUKEMA. Thank you. Mr. Chairman, do I have just another moment on the Sudanese question? Because I have been concerned recently to hear talk that perhaps there are improprieties in the trucking contracts with respect to Sudan.

Mr. McPherson, I know you've talked with some people this week on that subject. Would you amplify, tell us what AID's procedures are in terms of trucking contracts in Sudan, recognizing that the Sudanese domestic problem, and the governmental problem is in and of itself something extraordinary that you really have no control over. But the private contracting is another question.

Mr. McPHERSON. We early on went to a company with substantial trucking experience in Sudan to coordinate our trucking effort to go out and provide its own trucks, and lease trucks, and the contract worked really quite well for some time. In recent days, however, there have been—and we thought there was some advantage to having one entity do it so you wouldn't get a bunch of people competing for the scarce commodity of trucks and driving the price up, up, up. We thought this was a real potential danger.

In recent days, however, there have been some questions as to whether or not we should have only this one contractor. And because of that, we have gone to some other entities providing local currency for them to independently rent trucks.

Now, we'll soon see what happens to the price of trucks. It seems to me that, in view of the concerns and questions that have been raised, it only made sense to go out and in fact open this trucking business up.

Mrs. ROUKEMA. Thank you, Mr. McPherson. I appreciate your forthright responses.

Mr. McPHERSON. Thank you.

Mr. HALL. Mr. Leland.

Chairman LELAND. Thank you, Mr. Chairman.

Mr. McPherson, the gentleman from Ohio alluded to the problems of moneys not being released, that there might be some possible constraints on funds imposed by OMB on your agency for a lot of reasons. But the main reason, of course, is to try to save money.

I'm concerned about that when there are so many emergency needs going unmet. There are so many hungry people not being reached, so many health needs not being met. There is such an acute shortage of transport in the Sudan, Ethiopia, Chad, and other nations. So many other emergency needs.

Is it true that OMB is trying to impose constraints on your expenditures to meet this crisis?

Mr. McPherson. Well, OMB has a discussion relationship with every agency in the executive branch. And sometimes they agree and sometimes they disagree and AID is no different in that regard. But, I think it's fair to say that OMB has not been an inhibitor, basically, or restricter in how we've handled the supplemental money.

They have moved money fairly fast; every now and then there was a day or so when we discussed this or that, but I can honestly say that I think the relationship with OMB on this supplemental money has been pretty good.

I've gone through a lot of years of relationships with OMB, and I think they are competent, able people. There's no question about that.

Chairman Leland. As long as Mr. Stockman is there, I can attest to the effectiveness that he renders. But that doesn't make a positive statement from my point of view about what he does with his effectiveness.

Mr. McPherson. But more than that, though, Congressman Leland, I think that in fact they have been quite responsive to our situation on this supplemental, and I have no really outstanding complaint or problem that I would—if I had an outstanding complaint or problem, I would probably say, well you know, I can't discuss these things within the executive branch, but I can go even further than that today.

I can tell you that in fact it's worked quite well.

Chairman Leland. UNICEF is saying that they need about $32 million for ancillary health care services to be delivered immediately. Are we going to help with that?

Mr. McPherson. We've got a substantial amount of money going to UNICEF. I don't have the figure right here. But I basically think we've been fairly responsive to UNICEF's concerns.

Chairman Leland. Don't we have about $40 million left in our disaster account?

Mr. McPherson. Thirty-five.

Mr. Leland. Thirty-five million dollars? Is there any particular reason why we're not spending that money? It seems to me that because of the severity and the complexity of the problems and the urgency of the problems, more so the urgency of the problems, that that money could be made available.

Mr. McPherson. Well, it's a—we need to spend it——

Chairman Leland. I'm not saying just throw money at a problem, but I understand that there is a serious need for somewhere around $30 million for health care services alone.

Mr. McPherson. I wouldn't put it that way. I'd be happy to look over UNICEF's request if it is a $40 or $30 million request and report back to you my views on it. But I think given the kinds of things that we've got underway, we are stretching the logistical and other systems to the extent we can, and I have not felt that there was a major restraint on health or other ways to—on money.

Money has not been, because of the way Congress responded, has not been a real inhibitor in getting at this. It's been the difficulties of working in countries with such limited logistical assistances, it has been, or in the case of Ethiopia, the environment, political environment in which we are working.

Chairman **LELAND**. Clarify something for me, Mr. McPherson. You suggested in your testimony that you provided $10 million for emergency health projects. Is that correct?

Mr. **MCPHERSON**. Yes. Obligated, yes.

Chairman **LELAND**. Obligated $10 million?

Mr. **MCPHERSON**. Yes.

Chairman **LELAND**. Do you think that's adequate?

Mr. **MCPHERSON**. I think given that the need to keep people healthy is to get them food, processed food or unprocessed food, in that ORT is cheap and easy to distribute along with the food, ORT being such an important part of things, and the immunization efforts on kind of a crises basis, that our response, again, given the logistical difficulties of delivering services, has been the right response.

Chairman **LELAND**. I've just done some simple mathematics, and it may be just that: too simple to be rational. But let me ask you to respond. If you spend $10 million for health, that equals about 7 cents per African at risk. We were just talking about the people who are at risk. Does that seem fair?

Mr. **MCPHERSON**. That's divided 150 million people? Well, there are obviously 150 million people that need to have health, need to have medical care. I think the issue isn't whether we've addressed all the health needs. They clearly haven't been all addressed. The issue is, what are your priorities to get to save the most lives with the logistical kind of system that we have to deal with.

And, in our judgment, the push has been to get food not just into the ports, but out there, and you get, you have medicines and tents and that kind of thing, that have stored up in that port in Ethiopia, in the south.

Chairman **LELAND**. Mr. McPherson, I understand where you're going with that, but let's not just talk about Ethiopia. I'm not just concerned about Ethiopia.

Mr. **MCPHERSON**. Well, Sudan, too.

Chairman **LELAND**. I'm sorry?

Mr. **MCPHERSON**. Or Sudan, as well, or Chad or wherever. What I really think is that in the months ahead, we probably can put more emphasis upon health that needs care beyond simply feeding as this problem gets a little less severe logistically, but I think that the overwhelming problem is to get food, it'll be through food processed and not processed food, that we will save the most lives. And ORT, I think ORT and immunization. Those three things: food, immunizations on a crises basis, the measles vaccine, and the ORT. That's where we put our efforts.

Now, the best way to keep a camp from having serious problems is to get the food in there, and keep the thing basically sanitary. Not have too many people crowd in together. I mean, the medical needs are really very elementary. It's almost public health. That's what it is. Public health concerns.

When you get a lot of people crowded in together, then all kinds of things can happen. Get a little bit more space, it's camp management. As I said, it's public health. I think if we get too elaborate, too involved, we won't deliver the health care we want to deliver and save as many lives as we want to save.

I would say, again, however, that I think as this crisis lessens, hopefully, with better harvests, that we can do a better job taking care of the more severe medical needs as the months go on.

Chairman **Leland**. I appreciate that, Mr. McPherson. I certainly hope this is the case, because we hear horror stories that people are dying by the score, particularly children, who are suffering from the related health problems. These people are in addition to those just needing food. I know we need to place a much higher priority on health care.

I'm not necessarily challenging you on this issue. It might be just a matter of us identifying and agreeing to priorities and conclusions.

Mr. **McPherson**. My experience, and I say this sincerely, that committee hearings like this help us on questions and problems, and I think that in the sort of second generation of this crisis, that health should have a higher priority and I think it's probably right that you begin to, that you talk more about it, now.

Chairman **Leland**. Speaking of that, I want to congratulate AID on promoting ORT and immunization projects. If you recall, we talked about that some time ago, and we're pleased and happy at the progress being made.

I do have additional questions, Mr. Chairman, but I am aware that my time has run out.

Mr. **Hall**. Mr. Gilman. Questions for Mr. McPherson?

Mr. **Gilman**. Thank you, Mr. Chairman. I certainly want to welcome our director, Mr. McPherson, before us this morning, and commend him for the efforts that AID has undertaken and brought about in helping to relieve the famine problems in Africa. I was pleased to see that some of our media report, recently, that over 50 percent of the assistance in Africa had been provided by our own Nation and a great deal of that effort rests on the shoulders of AID and we commend you, once again, for all of those efforts.

Mr. McPherson, in looking over all of the problems, I gather that we've learned a lot of important lessons. Are these being put together now, with some important recommendations for the future?

Mr. **McPherson**. Yes, there are two parts about this: one, we're looking over our own experience and we think there's going to be some interesting things that'll come out of that.

And second, I'm in the process of recommending to Brad Morris, or to other parts of the international community, that the donor community get together at a working level, probably, and get together and see what lessons, as a donor community, we can pull together, looking what we can pull out, looking toward next year.

We've got a few months. And now is the time we ought to say, what did we learn. Now, there's two parts to this.

One, how can we, next year, how can we do a better job of handling the disaster. We know there's going to be some. I think it may be much less, but we know that it will be some problem.

And, next, we've got to use this disaster to think about how we can have a more effective early warning system, for another drought. This will not be the last drought that Africa has. If Africa does the right kinds of things and we help them in the proper fashion, in 20 years, it'll be a much better Africa, but in the interim, there's going to be some problems.

So, how can we work that ought.

We brought up at the summit, the United States, along with some others—we were certainly a spearhead of this—the idea that we had to get together some solutions on this. We think there's some technological solutions and other solutions that'll help the world and earlier time, with more scientific accuracy, to deal with famine.

When there's an outbreak of a disease, we've got institutions like the Communicable Disease Center in Atlanta that can say, with some scientific precision, what the dimensions of the problem are. And nobody challenges it.

I'm not suggesting that we need a new institution. It's probably a combination of people and technique, but we need to have some way that the administrators of the funds and the programs can have before them something of the sort of data that the Communicable Disease Center has on outbreaks of diseases.

Mr. GILMAN. How is our own early warning system. I remember a few years ago, when we had to embark on a massive supply of food stuffs for some of the countries in need that we found there were a number of shortcomings with regard to our own intelligence gathering of agricultural statistics.

Have we improved that system over the years? Mr. Hanrahan, whose going to be testifying a little later on, mentions that, in recent months, USDA and AID have been cooperating in the preparation of annual food needs assessment reports for Congress that are required under the Public Law-480 Program and that the assembly and maintenance of data will become a joint USDA/AID effort for what I guess will be the first time.

Mr. MCPHERSON. That's right.

Mr. GILMAN. Are we making some progress?

Mr. MCPHERSON. I think so. I think so, and we've got, of course, a better satellite system than we once had, too. I think it's my hope that we can use this crisis to sort of pull together the institutional and technological structure to, on a more or less permanent basis, do a better job.

Mr. GILMAN. Is there something that this committee, or Congress can do to help facilitate that effort?

Mr. MCPHERSON. Well, I think you can encourage us, and prod us. I believe it's in the process of happening, but I've always found that congressional interest is a stimulant. I personally am deeply committed to it. I think it's fair to say that I've been something of an encourager of this whole idea, and we'd like to have your interest on it.

I don't think it's a matter, Congressman Gilman, of a lot of money. I don't think we ought to go off and create a new institution. We want FAO, for example, to play a broader role.

Mr. GILMAN. What about the international community? Are they doing some things to strengthen the intelligence gathering and the reporting system, so that there is adequate early warning?

Mr. MCPHERSON. Some, but there's a lot more that needs to be done. You know how some of us have disagreed on the FAO figure. Now, we wouldn't disagree on CDC figures, communicable disease figures on disease, and if they came in with a certain kind of data support, there'd almost be no dispute. We need a greater degree of technicality; we need to have—I'm not talking about FAO, particularly—we need less politics in this.

This ought to be a more of a professional kind of set of determinations, and I'm not tossing stones at anybody, now. I think that we haven't put together, yet, all the technology that we have. We got the satellite.

We now know that we have to have some input from the field. You can't just sit in Rome or Washington, and decide how many people are starving in Chad, when you don't even know how many people live in Chad. It's never going to be exactly scientific, but we can be a lot better, we think. And I'm committed to getting such a system together and I'm spending some time prodding that this happen.

This should not be just a U.S. effort; this needs to be an effort of the major donors. And the major donors are a small community. Between the EEC, the Canadians and us, and then a little bit less the Australians, I mean, we provide the lion's share of the food. And those are all professional groups. We all end up getting in there and putting in a big share of things when times get tough, and there's no reason why you can't predict a little better.

Now, I want to be sure that we don't get a system that automatically triggers everytime there's a flicker someplace, and you end up smothering people with aid and food. And setting up permanent dependencies. It's a little bit different than disease. There's nothing wrong with giving a child an innoculation of some kind. You don't really create a dependency relationship, so you can perhaps overreact, if you will, at no cost in the case of disease.

But you can overreact at substantial cost in the case of food, I think, and this is going to be a problem, but we can be, I believe, less political, more professional in the years ahead, and that's my commitment.

Mr. GILMAN. It's certainly encouraging to hear your commitment. I've heard some of these statements a few years back before you were in AID expressing concern about these very same problems of a lack of adequate information, a lack of proper reporting, and a lack of an adequate early warning system.

I hope that your efforts will encourage some better intelligence and better assessments so that we can meet these needs without a great deal of waste and a great deal of overexpenditures, as you've indicated.

With regard to some of the health problems that our good member from Ohio, Mr. Hall, has been focusing on. I note that Dr. Dondero, in his testimony before us today, is summarizing that the highest priority emergency health requirements identified during the current crisis have been, in his opinion, the provision of food and supplementary and therapeutic feeding, measles immunization, vitamin A prophylaxis and oral rehydration therapy, plus two management issues of rapid needs assessment of continued monitoring and adequate allocation of resources to prevention control activity.

What can we do at the time of distribution of foods to help provide for some of the health needs at the same time, rather than having that time lag that has lost thousands if not millions of lives, because we weren't there expeditiously?

Mr. McPHERSON. Well, we try to distribute ORT with the food. You go to a typical camp in Ethiopia, Sudan, or Chad, or someplace, and you're going to find ORT there. And that's very important because, odd as it may seem, that children that have severe malnutrition also often have diarrhea problems, and so the ORT is important.

We've been able to respond fairly well with vaccinations. Now, it takes a cold chain. Those vaccines usually have to be held at a certain temperature in order to be effective. They can't be at room temperature; they need to be held below that or else their effectiveness is destroyed.

So, to vaccinate everybody, you know, all camps, all the time, without regard is an additional strain upon the logistical system that we think we shouldn't put when the principal move is food. And so we've responded to threat. Like the camps in Eastern Sudan and so forth.

I think that fundamentally, I agree with the statement and I think that generally that has been the prioritizing that we have put to our program.

Mr. GILMAN. With regard to the assessment of the problems that are out there, will you make that a formal report in the near future so that we'll have an opportunity to take a look at what your recommendations are, concerning the lessons that have been learned.

Mr. McPHERSON. Well, I'm sure there will be some things that I won't necessarily want to shout about, but we think it's time to really look at ourselves and say, what happened.

Mr. GILMAN. And I think it's important to share that with the Congress and take a look at what may need to be done belatedly.

Mr. McPHERSON. We see that as a productive opportunity, actually.

Mr. GILMAN. Thank you. Thank you, Mr. Chairman.

Mr. HALL. Thank you, Mr. Gilman.

Mr. Dorgan, I believe you have questions.

Mr. DORGAN. Thank you, Mr. Chairman.

Mr. McPherson, first let me say that, as a Member of Congress and as a world citizen, I share your frustration and concern about what's happening with respect to the Government of Ethiopia. I would probably be much harsher in my judgment about the inept quality of leadership and some of the neglect that's exhibited there for human life, than you are.

But I think that to see a government that suggests in its actions and behavior, its disregard for human life, concerns me, and I hope that message does get through to those responsible in Ethiopia.

Let me ask a couple of questions, several of which have been asked in different forms.

As I understand it, UNICEF has indicated with a fair amount of clarity that there exists about $32 million in emergency health needs at the moment in Africa. If they are described as emergency health needs, and UNICEF estimates about $32 million of those needs that exist, and if you have $35 million unspent in the emergency account, why aren't we using that?

Mr. McPHERSON. UNICEF is a fairly aggressive contractor, I might say that to begin with.

Mr. DORGAN. Are you disagreeing with UNICEF?

Mr. McPHERSON. Pardon?

Mr. DORGAN. Are you saying you disagree with the estimate?

Mr. McPHERSON. No, I'm just saying that I'm sure that it would be productive to continue to work through those figures. I spent a lot of time with them, including probably half an hour on the phone yesterday afternoon. He's a very effective good man. And incidentally, about half of the $10 million we spent has gone to UNICEF.

I just don't have a full response on that $30 million that is suggested that we should spend, and I'd be happy to provide that. I think, though, that given the logistical problems and priorities we've got, I would probably want to for at least the next couple months, continue roughly the emphasis that we have, shifting more emphasis toward health and other things probably around the time of the harvest there in this.

Mr. DORGAN. Well, can you look into that because it seems to me if—and I don't know what the right numbers are, but if UNICEF is saying with some confidence that there's $32 million of emergency health needs that currently exist, and if we have $35 million that we've appropriated that's available for use, regardless of who the contractor is, it seems to me we ought to move that money.

Mr. McPHERSON. I'm not being critical of UNICEF. I just say that we've always found it very productive to sort of work through the contracts proposals with them.

They do a good job.

Mr. DORGAN. Can I just say that there are some who suspicion, perhaps, that maybe if you spend the $35 million, you have to come back and replenish that, and OMB really would not like to have to ask Congress to replenish that. I don't know whether that has any validity or not, but if that's the case, let me say that as a Member of Congress, we appropriate the money. If the need exists for emergency health care, we would hope you would move that money out to satisfy that need.

And I would hope that you would visit with OMB and UNICEF about that estimate, and others, and find out what emergency health needs exist and see if we can respond to them.

[Information submitted by Mr. McPherson follows:]

UNICEF's Emergency Health Program in Africa

After the United Nations donor conference in March 1985 UNICEF, in April, issued an updated appeal for emergency health and water activities. AID reviewed the new appeals for the six most affected countries: Chad, Ethiopia, Mali, Mozambique, Niger, and Sudan. I believe the $32 million you refer to is the sum total of the revised UNICEF interventions in those six countries. At present we have approved or will soon approve approximately $15.3 million from the United States to support UNICEF's emergency health and water programs in those countries.

AID Support for UNICEF Emergency Programs

	million
Chad	$1.45
Ethiopia	3.00
Mali	2.00
Mozambique	3.25
Niger	1.20
Sudan	4.40
Total	15.30

Let me, Mr. McPherson, ask you a couple of questions about IFAD. I am very interested in the International Fund for Agricultural Development. I know as a North Dakotan that we produce a lot of crops, and we have bins that are bulging and a tremendous surplus product in this country. It's very frustrating for me to see us not be able to move that quickly to people who need it immediately through Food for Peace.

While we have the capability to try and move some of our food product to people who are hungry, in the long term, I think one of the very valuable approaches is in IFAD. That innovative agency has the ability to spend about half the money it costs us to move a ton of food to a country in Africa and to get it to people who are hungry, spend about half the cost of moving the ton of food by growing that food in the country, not just for that year, but also developing the technology and seed to allow them to grow that year after year.

As you know, we're hung up on IFAD replenishment negotiations, and you talked just a minute ago about wanting to get away from the politics and getting back to more product. I would like that to be the case with respect to the replenishment negotiations for IFAD. As I understand it, the 2-percentage-point negotiations that are going on between 38 and 42 or 40 to 60—excuse me, 42 and 58, I believe it was, and 40–60, that 2 percent difference between what we pay now, and what the administration would think we should pay under the new approach, represents $3 million. That's what we're hung up on.

By contrast, take a look at what we do not get hung up on in the agreements between us and our allies in NATO. Billions of dollars of unmet commitments from our allies in NATO, but that doesn't seem to hang up our flow of arms and soldiers to defend Western Europe.

I'm saying that I don't think we ought to get too hung up over $3 million. What can you tell me about the replenishment negotiations? When will they get on track and when will they get this done?

Mr. McPherson. The hangup is not the $3 million.

Mr. Dorgan. All right, what is the hangup?

Mr. McPHERSON. The $3 million is I suppose part of an issue, but the real problem we've got is that the OPEC countries, basically the Arab donors have not yet put a number on the table. They, I spent a lot of time in this, of course, in the last few weeks, including talking to the chairman of IFAD, I guess just 2 days ago, again, on the phone.

They have not come up with a number which a firm offer which is their 40 percent or their 38 percent. In other words, we don't know what number we can put our percentage against. There have been some discussions back and forth but what we really are awaiting is a firm number, whether it be 40 percent, whether it be 38 percent, or whatever it be. What is their firm number. I'm a little bit like the guy who was selling his house, wants to sell his house; puts it on the market for *x* thousands of dollars, and the prospective buyer doesn't make an offer. He keeps on walking back in front of the house. And my wife keeps saying, that buyer out there, he wants to buy our house, if you'd just lower the price, just lower the price, he'll probably walk in and give you his offer.

I'm waiting for the Arabs to walk into my house to tell me what they're offering. It doesn't make much sense to keep on lowering the price while we're waiting for the Arabs to come in. And that's essentially where I feel we are.

Mr. DORGAN. Well, let me ask a couple more specific questions, then.

Mr. McPHERSON. They're tough bargainers. I'll tell you. I just think that all, and I've made it very clear, we're not going to move until you give us an offer, and I think they understand that. Because I'm committed to an IFAD, and I believe by just waiting for them to give an offer, rather than negotiating among ourselves—that's what we've been doing—that they'll come in with an offer and frankly, they sound more optimistic in recent days and I met with all of them, I met with the Saudis and the Kuwaits and so forth in West Berlin at another session, another kind of session a few weeks ago, and I believe it will work. And I believe that the U.S. Government, when we get an offer, will show some flexibility.

Mr. DORGAN. Let me ask then, is that a change in position somewhat? And, if it is, I congratulate you for it. The suggestion that the share itself is not the major issue. If you're suggesting greater flexibility here in order to resolve this issue, I certainly congratulate you on that.

Mr. McPHERSON. I'm not yet responding to my wife, who says, lower the price before he walks in.

Mr. DORGAN. I understand that, but what you said was, the proportionate share is not the hangup?

Mr. McPHERSON. That's right.

Mr. DORGAN. If that's your position, that leads me to believe something different than I had believed when I sat down at this table this morning.

Mr. McPHERSON. For a few weeks, we've been saying essentially what I've said but it doesn't always, I probably don't communicate it clearly enough because a lot of good people, like yourself, I haven't gotten to.

We basically think the question is what are they—what are the OPEC countries going to put on the table. At that juncture, if it's a reasonable offer, we expect to bargain in good faith.

Mr. DORGAN. Let me ask you one final question, Mr. McPherson. If you were not having to bear the encumbrances of a Congress or a President and an OMB, and were an independent contractor with all the money you wished to spend——

Mr. MCPHERSON. This isn't a proposition, I'm sure.

Mr. DORGAN. Not at all. How different would your response be to the problem in Africa?

When we talk here today, we describe the impediments to moving a bushel of grain or some food, or ORT from where it exists to someone who is hungry, and we describe all of the difficulties in doing that. And I understand them. I'm not minimizing them.

And yet, you know, if tomorrow something militarily comes along that we want to mobilize, we really mobilize. We mobilize something fierce and we get things done. If money were not the object, setting aside all the things that you said this morning, how different would your response be to this and how much more could we be doing using some different approaches and some other resources?

Mr. MCPHERSON. Oh, when I look back over the last year and a half or so, that I've been fairly engrossed in this issue, there's of course, I suppose, some things that I would do different. I've never managed a drought effort before. I suppose it's like everybody else that's done it before, they never—you only get a chance to do this, or burden or whatever, to do this once, generally, I guess.

But I think by and large we would do what we've done. Some of the things we would have done sooner; some of the things maybe not quite so much. I think by and large I'll tell you the principal inhibitor against mobilization in the sense that you speak of, is that we don't run these countries.

If we ran Ethiopia, or Ethiopia was some part of our sovereign jurisdiction, we would just move in and we'd do it; we'd run it and it would work. We'd rebuild the port, we'd have the, we would do all kinds of things, if we ran it. But countries don't seem to want to have that happen, and certainly Ethiopian Government doesn't want to have that happen. And the reality is that, and even then we'd have problems, of course, because we can't rebuild—you can't build a railroad in a few weeks.

But essentially, we work with local institutions, with local governments, and all their working problems, and I think by and large America has probably done what it should do.

Mr. DORGAN. Can I just say, Mr. McPherson, that you personally give me great confidence. I've watched you and listened to you, and I like what you say and what you do. I do have some difficulties from time to time with OMB and others who I think inhibit some of the things that you might like to do, and for very explainable reasons, you would not necessarily present that to us today. But let me congratulate you on your efforts.

Mr. MCPHERSON. I'll tell you somebody that really deserves an enormous amount of the credit for the response, and that's the President. I've dealt with the President on this issue a number of times, I've gotten phone calls from him, asking where this or that was. And I know his feeling is we've got to do it. He hasn't said, how much is it going to cost. He usually does ask that.

He hasn't said, how much is it going to cost. He said, now, are we going to do this? Is it going to get done? And the whole business of a hungry child knows no politics is really his. An administration where east-west concerns are deep concerns, and it's his position, his position a couple years ago, was that——

Mr. DORGAN. Mr. McPherson, it's not my intention to be critical of the President but I understand and your point was well made. But let me just say that the Office of Management and Budget is operating at the request of the President and, for example, on June 20, when they sent a request to Congress for a deferrals of expenditures on remaining title II and OFDA funds and so on, I assume that——

Mr. MCPHERSON. There was a technicality and a point of confusion.

Mr. DORGAN. Well, I wish I had the time because I think we ought to ask some questions about that and find out what's happening there but again, let me say, that I think you, personally, are doing a good job, and have your heart in the right place. I appreciate it.

Mr. HALL. Thank you, Mr. Dorgan.

Mr. Fazio, any questions for the witness?

Mr. FAZIO. Thank you, Mr. Chairman.

Mrs. ROUKEMA. Excuse me?

Mr. FAZIO. Yes?

Mrs. ROUKEMA. Will the gentleman yield?

Mr. FAZIO. Be happy to yield.

Mrs. ROUKEMA. I'm going to have to leave the hearing unfortunately, but I did want to, while Mr. McPherson was here, express on behalf of Mr. Cooper Evans, who is our task force chairman on the minority side for international affairs, his regrets in not being here. He was unavoidably detained.

Mr. HALL. Representative Ted Weiss was also here earlier.

Mr. Fazio.

Mr. FAZIO. Thank you, Mr. Chairman. I'm going to have to leave too, because it appears that we're going to have a budget conference again, or back, at least, in confrontation. And that leads me to want to follow up on some of the line of questioning that Mr. Dorgan had engaged in.

I think we all, Mr. McPherson, certainly you and the administration and the Members of Congress, the whole country can be proud of the reaction that we've had to the famine in Africa.

But after the crisis passes, after the media moves onto other things, everyone from the President on down goes back to thinking of this kind of assistance as foreign aid. And I think everyone knows that has a town hall meeting during their term in Congress, that the first suggestion that comes from the grassroots about where to begin fighting budget deficits, is why aren't we cutting foreign aid.

And so I guess as the Appropriations Committee and the Budget Committee attempt to deal with our deficits, just as OMB does, they come to this account and tighten down.

I wonder if you could tell us whether you think that $650 million that the Foreign Operations Subcommittee in the House Appropriations Committee has designated for title II, Public Law 480 is adequate.

You, obviously, have submitted the number at that level, but I sense that what you ask for that account from OMB is a good deal higher. You don't have to document that. It would not be surprising for us to find that. Do you think $650 million is really adequate when you look to the problems that I think everyone sees on the horizon?

Mr. McPherson. I think we need to see what the harvests produce in a couple months. The harvests have come in in Southern Africa, and they're pretty good, and we think we need to get a little further into that, but we think that the harvests there will not call for any massive effort, and perhaps no more than an ordinary kind of contribution.

We won't know until almost, until at least a couple months from now what it looks like in the Sahel, and if it looks anywhere near like this year, we're going to need a lot more food. If it comes through, as it might well, then we're going to be OK and our position is, basically, that we should look at what those harvests produce, and, at that juncture, we come to you or we don't come to you.

I mean, I'm not going to have any hesitancy about fighting for another supplemental if the need demands it. But right now, we don't know, the reality is, and I think, given our state of knowledge, that number is a reasonable number.

Mr. Fazio. How much reliance could you place on the $225 million in the Presidential reserve which was part of the supplemental issue?

Mr. McPherson. We expect to be able to use that.

Mr. Fazio. You intend to really spend that out? That is part of what you are factoring in to your——

Mr. McPherson. Well, it is exactly what the name calls it, a reserve, and if we need it, I'm certainly going to knock on the door to get it.

Mr. Fazio. You feel that is your source, without having to come to Congress to support a supplemental, you'd go there first and that is really your adequate reserve to take care of any contingencies?

Mr. McPherson. Well, it's adequate today, given our state of knowledge, but it may not be adequate at the time the harvests come in. But truly, we just don't know and if I were to ask for more money now, it seems to me that it might not answer the question or problem, and I might want more money later on, or I might not need the money. So what we really opted to do is to provide an ordinary level of title II and wait for the harvest outcome.

Mr. Fazio. I believe you are sincere and I know you will fight for a supplemental but what troubles me is a member of the committee that has strongly supported them, the House Appropriations Committee taking the figures the administration submits and picking up support from the Foreign Affairs Committee and other interested parties—including this committee—has to increase it greatly to get it into the ballpark. I think it's fair to say that the record shows a certain reluctance, not an eagerness, to come to Congress with a figure that really meets the need. Putting the burden on us to be the big spenders, so to speak.

Putting the burden on Congress to essentially carry the ball to a level that most observers consider to be adequate. Is that some disappointment to you or do you dispute my contention?

Mr. McPHERSON. I think the Congress and the executive branch have worked well in getting what we need to get done this year.

Mr. FAZIO. Well I think we have, in effect, done what you think we needed to do which was to augment to supplement the requests that were made of us? Is that correct?

I mean, what was the original administration request in the supplemental?

Mr. McPHERSON. Well, it was substantially lower than what was appropriated. We had I think the U.S. Department of Agriculture has shown enormous flexibility, though. For example, in using options like the section 416 as an option to increase the amount of food. There's always disputes about these numbers released every time, since I've been here there've been disputes, but I think that Congress has been and the executive branch have formally and informally done a good job getting this together.

Mr. FAZIO. Well, the $235 million figure that I'm informed was the original request is obviously vastly inadequate in light of the need that we have and in light of the eventual figure we settled on.

I guess I'm concerned about the Congress always finding itself in a position of having to bring the number up. I'm not sure that we don't get private signals from people like yourself.

Mr. McPHERSON. We didn't argue for a higher number. I don't mean to suggest that.

Mr. FAZIO. Well, I didn't mean to say you publicly did but I think everyone understood that there were people in the administration at different levels sending signals that in effect conflicted with what we were hearing from OMB. But we need, I think, particularly with the experience that's been behind us, people like yourself to be willing and able to speak out soon enough and loudly enough to get the money that you need and to generate the support that I think your characterization of the President's attitude would generate. In other words, we need to see that support that you report to us here today, early so that the American people are willing to be led in the direction of an adequate funding level.

My sense is that even in the normal appropriating process, we low ball it, perhaps for our own reasons, as well, so that we have a figure we can live with in the budget process, or an appropriations markup that lives within the budget resolution figure, and we all understand that the demand that's out there far exceeds the figure that we've all kind of quietly agreed to live with.

Mr. McPHERSON. But I think this year, Congressman, for your 1986 number, that that $625 is a reasonable number. I think that if we have serious problems at all, that that's not going to be enough money. I think that, but I honestly do believe that we don't know what kind of problems—we don't expect that many problems from the South, and we don't know what problems we're going to have in the Sahel, and there's a tremendous danger that we could get into the business of pouring too much food into Africa.

We've really got to be careful about that. We, for example, may give Egypt too much food under the title I program. I mean, I've always been worried about that, and if we don't—and you get and these disasters, if we're not careful, end up hurting—everybody agrees with this—end up hurting people. And I don't want to have an awful lot of food which then Congress says, there's a starving person here or there, or somebody says, and to absolutely make sure everybody is fed, we put too much in.

I personally honestly feel that the numbers that you have before you now are adequate and it is my commitment that I intend to fight for supplemental—there's a process to fight for supplementals, I know that, but I intend to fight for a supplemental if we need it.

Mr. FAZIO. Well, I appreciate your comments, and I do think that you, personally, have done an excellent job of administering the program and managing your first drought crisis, as you indicate.

But I do hope that we can be as honest, not only with ourselves privately, but with the general public in the public domain about the demands that could be placed on us. I understand this committee has educated me, in fact, to the dangers of force feeding, and I think we all understand that there are potential improvements in the environment that might bring about a better harvest.

But I certainly don't think we ought to go through another experience like we had to go through where the Congress has to come through with a larger and larger funding mechanism. It does, at times, put the burden on us in a fiscal sense, and require us to lead people who are somewhat skeptical, given our own domestic problems, and the next crisis in Africa might coincide with an economic recession in this country, that will make it much more difficult for us to do what we all know—we in this room—needs to be done.

Thank you.

Mr. HALL. I believe that Mr. Dorgan has a last question.

Mr. DORGAN. Thank you, Mr. Chairman.

I couldn't help but be surprised at this suggestion of too much food in Africa. I understood what you meant, but it's kind of a paradox in terms of what's happening there at the moment.

Can you give me some idea of—we're talking about dollars and numbers and acronyms and so on this morning—how many people have died in Africa during this——

Mr. MCPHERSON. I don't think we'll ever know. In fact I know we'll never know.

Mr. DORGAN. What is your estimate?

Mr. MCPHERSON. Thousands, I feel confident it's not millions, but thousands. We don't know. We don't know the population in most of these countries.

Mr. DORGAN. But as a—and I want to be brief here, but as manager of a program to respond to what appears to be a major crisis in this world, your estimate of the extent of the problem must include some estimate of what has happened and what will happen. Some say that there have, been several million; some say up to 5. I don't know, but how many people do you think have died in Africa at this point in this famine?

Mr. MCPHERSON. Well, I would think in terms of thousands and probably hundreds of thousands, but I feel confident that it's not millions. That doesn't mean there hasn't been enormous hardships and you see the problem you get to just—I feel confident I can assert a figure because no one's going to be in a position to really contradict me, I suppose.

You get a situation like in northern Ethiopia and then we don't know how many people live in northern Ethiopia. A couple years ago, people thought about 32 million people lived in Ethiopia. Today, they talk in terms of 42. And how many kids or old women or old men, died in that—and these of course are the most vulnerable people—died before they went to camp.

You ask individual camp people, and they'll talk about who died where in their family.

Mr. DORGAN. The reason I asked the question of you, for example, is that some estimates 1,000 to 1,500 deaths per day in the Tigre Province of Ethiopia now, and from all kinds of scattered pieces of evidence, there are suggestions that we're talking about not hundreds of thousands, but perhaps 1 million to several million deaths in Africa.

And the reason I ask, again, is to try and see if we have some description of the crisis in terms of the quantity of human lives that are lost here.

Mr. MCPHERSON. Well, we talk about in Sudan, let's say, 8 million people that we figure are under threat. Now, 8 million people aren't totally without food. Maybe 1 million people are totally without any resources.

Mr. DORGAN. That's in Sudan?

Mr. MCPHERSON. Let's say that's in Sudan.

Mr. DORGAN. Only, right.

Mr. MCPHERSON. Now, Ethiopia has maybe about the same, a little bit less probably in terms of people who are seriously threatened. There are, when you get figures like the one often kicked around, 150 million people in Africa are under threat, well those 150 million people, most of those aren't under real serious threat.

Go country by country, in the part of Sudan that really are scary right now is western Sudan. Maybe 3 million people over there counting Darfur and the neighboring province, but even those 3 to 4 million people, most of those have some resources.

I'll tell you what is very interesting to me in terms of what people have. It's that 50,000 people who have gone over to Sudan from Tigre and Eritrea in northern Ethiopia have gone back to their homes to plant crops. They went back with enough food to take care of themselves for a few weeks, but what it almost certainly meant was that they had something to go back to.

I mean, these poor people are very practical smart people within the context of their environment. There was probably some food and some seeds back there for them to go back to or they wouldn't have gone.

I'm not trying to minimize this as a problem, because it's a terrible problem, but the reality is that in this scientific what are the numbers kind of world in which we live in, no one knows.

Mr. DORGAN. Well, Mr. McPherson, thank you very much. If you have any published information at AID with respect to the number of deaths in Africa from famine, and the estimate of those at risk, would you provide those to the committee?

Mr. McPHERSON. Sure.

[Information submitted by Mr. McPherson follows:]

DROUGHT DEATHS IN AFRICA

We do not have accurate figures on the number of deaths associated with the present drought in Africa and do not believe it is possible to obtain such figures with current information. While surveys in specific camps and towns have given us reasonably accurate figures, we do not believe these always represent the true condition of people at risk.

The attached United Nations Disaster Relief Co-ordinator's Report number 6 for Africa, July 1985, identifies 33 million people at risk in sub-Saharan Africa. UNDRO's individual country estimates compare with the information we have been able to obtain from our field missions, although the situation is constantly changing.

UNITED NATIONS
DISASTER RELIEF CO-ORDINATOR

SITUATION IN AFRICA AN OVERVIEW

6

July 1985

Adverse climatic and economic conditions as well as other problems across most of the African continent have brought about emergency situations in a large number of countries. Organizations of the UN System have responded to the crisis by stepping up their relief aid to the affected regions.

The following table, compiled by UNDRO, provides an overview of the on-going emergency relief activities and support programmes.

This table, prepared by UNDRO, is regularly updated with additional information of interest to donors, and has been published as an annex to the UNDRO News since August 1984.

For latest information and details of outstanding needs, please contact:

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	New York	754-5705		666744 undro

Comments and relevant additional data are welcome and should be addressed to: *The Editor, UNDRO News – Palais des Nations – 1211 Geneva 10.*

OFFICE OF THE UNITED NATIONS
DISASTER
RELIEF
CO-ORDINATOR

BUREAU DU COORDONNATEUR
DES NATIONS UNIES POUR LES
SECOURS EN CAS
DE CATASTROPHE

No. 6

SITUATION IN AFRICA: AN OVERVIEW OF EMERGENCY RESPONSE

July 1985

COUNTRY Sub Sahara North Africa	POPULATION in millions mid - 1983 (average annual growth %) 1	GNP PER CAPITA in 1983 dollars (average annual growth %) 2	INFANT MORTALITY RATE 1983 (per thousand) 3	1982 ODA PER CAPITA in dollars 4	DEBT IN MILLIONS OF DOLLARS 1983 (debt service ratio) 5	EMERGENCY CONDITIONS AGGRAVATING FACTORS	ESTIMATED NUMBER OF PEOPLE AFFECTED in thousands 6	APPEAL FOR ASSISTANCE SPECIAL ECONOMIC ASSISTANCE PROGRAMMES	UNDRO CONCERTED RELIEF PROGRAMMES (dates of first and latest situation reports) 7	OEOA SUMMARY OF EMERGENCY UNMET NEEDS 1985 in millions of dollars 8	UNICEF EMERGENCY PROGRAMMES	WFP CEREAL PLEDGE GAP in metric tons 9	UNHCR MAJOR PROGRAMMES in thousands 10	WHO ON-GOING EMERGENCY OPERATIONS	ORGANIZATIONS OTHER THAN UN SYSTEM		LAST ESTIMATED HARVEST	CROP PROSPECT
															IGOs 11	NGOs 12		
SUB SAHARA																		
ANGOLA	[illegible]	N.A.	[illegible]	[illegible]	N.A.	Displaced Persons Civil Strife	[illegible]			[illegible]	*	[illegible]			EEC (c)	[illegible]	[illegible]	not yet planted
BENIN	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]						*		[illegible]	[illegible]	normal
BOTSWANA(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought	[illegible]		[illegible]	[illegible]	*		[illegible]	*		[illegible]	[illegible]	not yet planted
BURKINA(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought	[illegible]			[illegible]	*	[illegible]		*		[illegible]	[illegible]	poor
BURUNDI(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Soil Erosion				[illegible]		[illegible]	[illegible]				[illegible]	not yet planted
CAPE VERDE(*)	[illegible]	[illegible]	[illegible]	N.A.	[illegible]	Drought	[illegible]	[illegible]		[illegible]	*	[illegible]		*	EEC (f)	[illegible]	[illegible]	not yet planted
CENTRAL AFRICAN REP (*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]			*		[illegible]			[illegible]	[illegible]	normal
CHAD(*)	[illegible]	N.A.	[illegible]	[illegible]	[illegible]	Drought/inadequate transport	[illegible]	[illegible]	[illegible]	[illegible]	*	[illegible]		*	EEC (c,f)	[illegible]	[illegible]	normal
COMOROS(*)	[illegible]	(N.A.) [illegible]	[illegible]	N.A.	[illegible]			[illegible]							EEC (f)		[illegible]	not yet planted
CONGO(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]						*						[illegible]	normal
DJIBOUTI	[illegible]	N.A. [illegible]	[illegible]	N.A.	[illegible]	Drought	[illegible]	[illegible]			*		[illegible]	*		[illegible]		
EQUATORIAL GUINEA(*)	[illegible]	N.A.	[illegible]	N.A.	[illegible]			[illegible]										
ETHIOPIA(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought/civil strife/inadequate transport	[illegible]		[illegible]	[illegible]	*	[illegible]	[illegible]	*	EEC (f)	[illegible]	[illegible]	poor
GABON	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]						*						[illegible]	normal
GAMBIA(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]			*					[illegible]	[illegible]	unfavourable
GHANA	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]						*			*		[illegible]	[illegible]	normal
GUINEA(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]						*			[illegible]	unfavourable
GUINEA BISSAU(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]						*		[illegible]	[illegible]	unfavourable
IVORY COAST	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]												[illegible]	normal
KENYA (*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]					[illegible]	[illegible]		EEC (f)	[illegible]	[illegible]	good
LESOTHO(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought	[illegible]	[illegible]		[illegible]	*	[illegible]	[illegible]		EEC (f)	[illegible]	[illegible]	not yet planted
LIBERIA	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]			*						[illegible]	normal
MADAGASCAR	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]						*	EEC (f)	[illegible]	[illegible]	normal
MALAWI(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]												[illegible]	not yet planted
MALI(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought/inadequate transport	[illegible]		[illegible]	[illegible]		[illegible]		*	EEC (f)	[illegible]	[illegible]	just planted
MAURITANIA	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought	[illegible]		[illegible]	[illegible]	*	[illegible]		*		[illegible]	[illegible]	just planted
MAURITIUS	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]						*						[illegible]	normal
MOZAMBIQUE	[illegible]	N.A.	[illegible]	[illegible]	N.A.	Drought/civil strife	[illegible]	[illegible]		[illegible]		[illegible]		*	EEC (c,f)	[illegible]	[illegible]	not yet planted
NIGER(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought/inadequate transport	[illegible]		[illegible]	[illegible]	*	[illegible]		*	EEC (c,f)	[illegible]	[illegible]	poor
NIGERIA	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]						*						[illegible]	normal
RWANDA(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]		[illegible]	[illegible]	*	EEC (c)	[illegible]	[illegible]	not yet planted
SAO TOME & PRINCIPE(*)	[illegible]	[illegible]	[illegible]	N.A.	N.A.			[illegible]						*			[illegible]	normal
SENEGAL	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought in the North	[illegible]			[illegible]		[illegible]		*		[illegible]	[illegible]	normal
SEYCHELLES	[illegible]	[illegible]	[illegible]	N.A.	[illegible]						*						[illegible]	normal
SIERRA LEONE(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]			*				EEC (f)		[illegible]	poor
SOMALIA	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]					[illegible]	*	[illegible]	[illegible]	*	EEC (c,f)	[illegible]	[illegible]	normal
SUDAN(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought/inadequate transport	[illegible]		[illegible]	[illegible]	*	[illegible]	[illegible]	*	EEC (c,f)	[illegible]	[illegible]	poor
SWAZILAND	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]			[illegible]			*		[illegible]				[illegible]	not yet planted
TOGO(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]									*		[illegible]	[illegible]	normal
UGANDA(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Displaced persons	[illegible]	[illegible]			*		[illegible]			[illegible]	[illegible]	not yet planted
UNITED REP OF CAMEROON	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]						*		[illegible]				[illegible]	normal
UNITED REP OF TANZANIA(*)	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Floods and inadequate rainfall	[illegible]			[illegible]		[illegible]	[illegible]			[illegible]	[illegible]	not yet planted
ZAIRE	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]						*		[illegible]			[illegible]	[illegible]	normal
ZAMBIA	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	Drought/floods	[illegible]			[illegible]		[illegible]	[illegible]		EEC (c)	[illegible]	[illegible]	not yet planted
ZIMBABWE	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]						*		[illegible]			[illegible]	[illegible]	not yet planted
NORTH AFRICA																		
ALGERIA	[illegible]	[illegible]	[illegible]		[illegible]	Displaced persons	[illegible]		[illegible]								[illegible]	not yet planted
EGYPT	[illegible]	[illegible]	[illegible]		[illegible]										EEC (f)		[illegible]	not yet planted
LIBYAN ARAB JAMAHIRIYA	[illegible]	[illegible]	[illegible]		N.A.												[illegible]	not yet planted
MOROCCO	[illegible]	[illegible]	[illegible]		[illegible]											[illegible]	[illegible]	not yet planted
TUNISIA	[illegible]	[illegible]	[illegible]		[illegible]												[illegible]	not yet planted
TOTALS	[illegible]				[illegible]		[illegible]			[illegible]			[illegible]					

Notes: See overleaf

NOTES

* Least developed countries.

★ On-going emergency projects/activities.

N.A. Not Available

[1] "*World Development Report 1985*", IBRD/World Bank, July 1985. Percentage figures for 1973-1983.

[2] "*World Development Report 1985*", IBRD/World Bank, July 1985. Percentage figures for 1965-1983.

[3] "*World Development Report 1985*", IBRD/World Bank, July 1985. Indicates number of infants, per thousand live births, who die before reaching one year of age.

[4] "*Towards Sustained Development in Sub-Saharan Africa*", IBRD/World Bank, September 1984. Net Official Development Assistance (ODA) figures shown only for Sub-Saharan countries.

[5] "*World Development Report 1985*", IBRD/World Bank, July 1985. Debt represents the amount of public and publicly guaranteed loans that has been disbursed. Debt service ratio is the ratio of the sum of interest payments and repayments of principal to exports of goods and services.

[6] No figures have been given for countries where population is only marginally affected.

[7] In major disaster situations, UNDRO Concerted Relief Programmes, developed in consultation with U.N. agencies, are designed to ensure that all critical needs are met.

[8] The Office of Emergency Operations in Africa (OEOA) was established by Secretary-General on 17 December 1984 as a temporary mechanism, under his direct supervision, to provide assistance to sub-Saharan countries affected by drought and famine. Unmet needs include food aid, transport, basic agriculture, health, survival items, water and logistics (OEOA status report — 19 May).

For latest information and details of outstanding needs, please contact:

UNDRO — Geneva - tel.: 34-60-11 telex - 28148 undr ch
New York - tel.: 754-5705 telex - 666744 undro

[9] Cereal pledge gap as of 1 July 1985: represents difference between actual pledges and FAO estimate of annual requirements made at time of harvest. Parentheses indicate that the gap can no longer be filled as the 1984/85 marketing year (determined for one year for each country around harvest time) is closed or deliveries cannot be carried out before the end of that year. In some countries for which, theoretically, the gap could still be closed, schedules for delivery and distribution of existing pledges preclude the delivery of additional pledges within that same period.

▲ For Chad, only existing pledges can be delivered and distributed before the end of the current marketing year (October 85). For Ethiopia and Mali, the gaps have had to be reduced to take into account logistics constraints. Priority is to distribute food aid in stocks or in the pipeline.

[10] "Report on UNHCR Assistance Activities in 1983-1984 and Proposed Voluntary Funds Programmes and Budget for 1985", 1 August 1984. Figures indicate total refugee population.

◆ In these countries UNHCR has launched special appeals for emergency needs up to 31 December 1985.

[11] Intergovernmental Organizations — Contributions of the Emergency Aid Service of the Commission of European Communities since January 1985. (c) denotes cash contributions and (f) emergency food aid.

[12] Non-Governmental Organizations — Abbreviations used:

AC - Africare; AMF - African Medical Research Foundation; BW - Baptist World Congress; CA - Care International; CAF - Catholic Fund for Overseas Development; CCAU - Comité Coordination Aide Urgence; CI - Caritas Internationalis; CRS - Catholic Relief Services; CWS - Church World Services; FH - Food for the Hungry; FP - Foster Parents Plan International; FRH - Freedom From Hunger; HS - Hôpital Sans Frontières; IA - Inter Aid International (International Christian Aid); ICRC - International Committee of Red Cross; JV - Japan International Volunteer Center; LRCS - League of Red Cross and Red Crescent Societies; LW - Lutheran World Federation; MB - Mission Baptiste; MS - Médecins Sans Frontières; OX - Oxfam; SC - Save the Children Fund; SE - Secours Catholique et Développement; WCC - World Council of Churches; WR - World Relief; WV - World Vision International.

[13] "FAO Global Information and Early Warning System on Food and Agriculture". Information refers to the country as a whole and covers estimates for the last food crop harvest and prospects of recently planted food crops for either the 1985 or 1986 harvest, depending on the country. More precise information, can be found in FAO's report "Food Situation in African Countries Affected by Emergencies", 29 June 1985.

[14] The last harvest estimate is compared to the average output of the previous five years (1979-1983). Symbols used are the following:

↑	above average
=	± 3 percent of average
↓	3 - 10 percent below average
↓↓	10 - 20 percent below average
↓↓↓	more than 20 percent below average

[15] Includes pulses.

[16] Cereal production is insignificant.

[17] Prospects described here range from "poor", to "unfavourable", to "normal" to "good".

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Mr. **Hall**. I want to thank you, Mr. McPherson. You've been here almost 2 hours. We appreciate your patience in answering questions. I think you can understand from the members' questions that we are very interested.

Many members have alluded to the figure of $32 million coming from a UNICEF estimate of unmet emergency health needs. That's one of the things that this committee has constantly talked about. You yourself have been in the camps; I've been in the camps. What we're seeing, of course, is not only a lack of food, but a host of problems.

What we're seeing is many of the camp children dying of infection, dying of diarrhea, dysentery, measles, and unsanitary conditions. Fundamental health needs; that's what is going unmet.

We want you to emphasize them as well. We want you to continue to put health on your priority list. Also let me say, the disaster relief fund is there; that's why it was appropriated. There are delays in moving the food; that's what the disaster relief fund is supposed to be used for.

We thank you for spending some time with us, and answering our questions. There are several questions that were not asked because of time, and we would like to submit those for the record, and ask that you answer in writing. Also, can you please get back to us as early as possible relative to the unmet health needs?

Mr. **McPherson**. Thank you. It'll be just a few days.

Mr. **Hall**. Our next witness is currently the senior analyst for international food and agriculture policy for the Congressional Research Service at the Library of Congress. A former Department of Agriculture official, Charles Hanrahan has an extensive background in global agricultural analysis.

Mr. **Hanrahan**. recently returned from a trip to sub-Saharan, Africa, where he visited Mauritania, Senegal, Kenya, and Zimbabwe. Mr. Hanrahan will testify on the status of food surveillance, early warning systems, and the preliminary projections for crop harvests for Africa in 1986.

Mr. Hanrahan.

Mr. **Hanrahan**. Thank you, Mr. Chairman.

STATEMENT OF CHARLES E. HANRAHAN, SPECIALIST IN AGRICULTURAL POLICY, CONGRESSIONAL RESEARCH SERVICE, LIBRARY OF CONGRESS

Mr. **Hanrahan**. I appreciate the opportunity to appear before the select committee this morning, and to testify on the issues which you have just raised. My statement is in response to a request from the chairman of the committee, Mr. Leland, and the ranking minority member, Mrs. Roukema, to address the issues of first, the current situation in Africa for food supplies and food needs in sub-Saharan Africa; second, to assess the way in which the United States and international agencies are currently monitoring food supply conditions and assessing food needs in African countries; and third, to make some suggestions or outline some considerations with respect to how the United States can strengthen its capacity to monitor and anticipate the food needs in those drought affected countries in Africa.

With your permission, Mr. Chairman, I have a written statement and I submitted that for the record, but I would like to briefly summarize the main points.

Mr. **Hall**. Without objection.

Mr. **Hanrahan**. First, on the current situation and outlook for food supplies and food needs in Africa. I think the main points are these: the drought has ended in Southern Africa and there are unlikely to be needs for emergency food aid there in the 1985-86 marketing year which has just begun. The harvest has been quite substantial in most Southern African countries, and the situation is much improved and should be much improved for their 1985-86 marketing year.

In the Sahel countries of West Africa, and in East Africa, the main problem, as Mr. McPherson has noted, is getting the food aid already delivered to hungry people who are in the interior. Port congestion, in particular, and logistical problems including shortages of trucks and availability of trucks, shortages of fuel, spare parts, difficulties with the railway system, are constituting a very difficult logistical morass which those distributing food aid in the international donor community, the voluntary agencies, recipient governments, are striving to overcome.

Complicating the situation with respect to delivery is the fact that the rainy season is underway in the Sahel and in East African countries north of the equator, that is Ethiopia and Sudan. But the planting conditions from the rainfall so far auger well for future crop production in those two regions. I don't want to overstate the prospects and the outlook for food supplies in the Sahel and in Sudan and Ethiopia, because I think there will still be food aid needs, but I think most of the information that is available to those compiling and analyzing information about the food situation, would indicate that planting conditions are favorable in the Sahel and in East Africa, that is, Ethiopia and Sudan; crops have been planted; seeds have germinated; crops are growing, but it is probably too early to predict what the final outcome of the crops will be.

The picture is somewhat clouded, that is the outlook, primarily because there were, in the Sahel, and in East Africa, seed shortages and shortages of other inputs. And particularly in Sudan and Ethiopia, there is displacement of people on account of drought and perhaps other reasons, which mean that many farmers were not in place to begin production as they would have when the rains came.

Additionally, in the Sahel, the rains were about 2 weeks late, which means that on the other end of the rainy season, toward the end of August, they will need another 2 weeks in order to ensure that the crop will be a reasonably good one.

Now, in my statement, I've included a fair amount of regional and country detail, with respect to the food situation and the outlook. Let me pass over most of that detail. It is in the written statement. I'll answer questions about it, if you would like.

But I would like to mention the situation, particularly in Zimbabwe. I recently had occasion to visit Zimbabwe to observe the harvest and the process of marketing there and it's instructive, not only in terms of the favorable impact that good weather can have on agricultural production in African countries, but also it illustrates the very important point that other things are equally, in some instances, perhaps even more important, to getting food production and agricultural production increased. Not just good weather.

Zimbabwe is harvesting a record corn crop and also marketing a record corn crop. Most remarkably, fully 40 percent, perhaps more, of the marketed corn crop is coming from traditional or small-scale farmers in poor areas in the so-called communal areas of Zimbabwe. That's remarkable largely for the fact that 4 to 5 years ago, practically none of the marketed corn in Zimbabwe was coming from those rural communal areas.

How did it happen? It's not just the good weather but the fact that Zimbabwe has instituted policies that provide favorable prices, cash up front, to its farmers. It's built farm-to-market roads into those communal areas; it's invested in buying stations for the Zimbabwe Marketing Board, which markets more than 2 million tons of corn on an annual basis in good times. It also relates to the fact that credit, fertilizer, and other inputs were made available to those farmers. So, in response, really, to some of the things that Mr. McPherson was indicating, African farmers can respond; they can produce food, if the policy, environment, and the investments have been made to support and foster that.

Now, with respect to overall needs for sub-Saharan Africa, in 1985 and 1986, of the agencies that make estimates of future food need, only the Department of Agriculture thus far has made an estimate, and at this time, the U.S. Department of Agriculture is expecting that food needs in sub-Saharan African countries, will be around 4 million tons in 1985–86.

It should be remembered that this is a preliminary estimate; it's a first approximation and better estimates will be available in September when more is known about the growing season in the Sahel of West Africa and in Sudan and Ethiopia and other East African countries.

Now, let me turn to the second part of the request from Mr. Leland and Mrs. Roukema, and that is the situation with respect to monitoring and assessing food aid needs. Three agencies are primarily involved in making food needs assessments. Those are our own Department of Agriculture, the United Nations Food and Agriculture Organization, and in recent years, AID has become involved in this process.

These three organizations employ basically a similar method of estimation and they use similar sources of information. In broad outline, the approach to food needs assessment is to first estimate consumption requirements, usually on the basis of some measure of grain supplies needed to support per capita consumption, and then to subtract, from that estimate of consumption, estimates of crop production, stocks, and commercial imports. The remainder from that process is the food need.

Now, the main sources of information on crop production for all of these agencies are field reports by their respective staffs, and remote sensing and satellite imagery which tells us something about crop conditions and weather conditions. Both USDA and FAO are primarily involved in this crop condition assessment and crop production estimation. AID has been primarily involved in food needs assessment. AID is not really in the business of estimating crops or assessing crop conditions.

There are differences in approach, and I've outlined some of those in the statement, particularly with respect to estimating stocks, commercial imports, and consumption requirements. They are largely technical differences in terms of methodology, but they do often result in divergent estimates of food aid need, and I think as we experienced, perhaps in the early part of this year, in trying to determine how much of a supplemental was needed to finance the food needs in Africa, they can lead to some confusion in the donor community with respect to just how much is needed.

Now, I note in my prepared testimony that, in recent months, AID and USDA have been cooperating in preparing food needs assessments. AID's field reporting is complementing the commodity and country analytical capabilities in USDA, and the food needs assessment, which the Congress requires the President and the Department of Agriculture to make with respect to the food needs, will be now prepared and issued on a quarterly basis, rather than on an annual basis.

Furthermore, the report will be reviewed and cleared in the established processes of the Department of Agriculture which is an effort, if I may say, to give the estimation procedure, the kind of credibility that Mr. McPherson attributed to estimates of, the CDC and so forth. That process of reviewing and clearing food needs estimates and estimates of, for example, United States crop production, Soviet crop production, underlies the accuracy and integrity of the Department of Agriculture's global food supply demand monitoring and forecasting system, and should provide a better basis for food aid decisionmaking, improved estimates, and hopefully, an improved response to food emergencies.

I would say that perhaps the major constraint to good assessments of food supply conditions and food needs in African countries is the inadequate and unreliable data that those countries can generate. They have little or no capacity to generate information about their own agriculture; about their own food situation, and other data difficulties, so that that does mean that quite often the estimates based on that inadequate country data are not much more than crude estimates.

I suggest three broad approaches that you might wish to consider in looking at ways to improve our monitoring and assessing capability. I've prefaced those remarks by stating that we are in a better position now, than previously in the last marketing year to estimate and anticipate what food needs will be because of the, I think, primarily, the interagency cooperation in the process of making assessments.

The first broad option is that AID and USDA can continue to cooperate even after the present emergency fades. Each has comparative strengths to bring to the process, and that should improve our assessments and our response.

Second, USDA and AID can cooperate more closely with FAO in producing food needs assessments. FAO is an important source of information because most other bilateral donors and most other international donors of food aid rely upon FAO in order to gauge the magnitude of their response.

United States and FAO estimates need not be in conflict. Beyond sharing information the two organizations can work together to resolve differences, which—as I indicated—are largely technical but do lead to divergencies. Such cooperation and coordination could eliminate those divergencies in estimates and confusion about the magnitude of food aid responses and lead to better food aid decisionmaking.

Finally, and perhaps most importantly, in terms of medium- and long-run considerations, the African countries' capacity to collect, analyze, and report on food supply conditions and food needs in their own countries needs to be strengthened. Such improvements will work not only to improve our food aid response and that of the international community, but just as importantly, can underpin the food policy reforms that those countries are making, and we are urging upon them, and also underpin development programs to increase food availability in those countries.

Thank you, Mr. Chairman. I'll be happy to answer any questions.

[The prepared statement of Mr. Hanrahan appears at the conclusion of the hearing, see p. 84.]

Mr. HALL. Thank you, very much. You know, 1 year ago all of us in the world, especially the Western donors, were very shocked to learn of the tremendous amount of food that was needed in Africa. The deficit of food was just amazing to us.

I guess my first question is, do you feel we are much better prepared today to make the kind of estimates that we need to make, country by country, than we were 1 year ago?

Mr. HANRAHAN. I think so. What has happened is that in the process of responding to the emergency situation and in trying to gauge the magnitude of our response, not the least of which was determining how much of a supplemental was required to pay for additional food aid, the agencies in our Government, USDA and AID, who've been primarily involved in this, have come to work more closely together. They have relative strengths that they bring to the process. AID has a field staff in most of the drought-affected countries. USDA has some agricultural attaché reporting on those countries, but above that, it has a capacity to analyze country agriculture, commodity situations, plus closer access to the satellite technology, the more advanced technologies for crop condition assessment and crop monitoring.

I think those two processes, the field work in AID, and the more advanced technical capabilities and competencies in USDA are being brought together, and will give us—should give us at least—a better capacity to monitor and to make better decisions.

If I might add one further aspect of it, USDA and AID have agreed to do more frequent reporting of food aid needs, and I think that's also something that will enhance our ability to make decisions and to respond appropriately. Rather than produce an annual food aid needs report, which is mandated in Public Law 480 to the Congress, USDA and AID will be producing a quarterly report which should provide a better basis for making decisions.

Mr. HALL. When these various groups make their field reports, AID and the U.S. Department of Agriculture, FAO, let's say other countries, are all of these field surveys separate reports?

Mr. HANRAHAN. To a large extent they are, but I would suspect—I don't know in every instance—but I would suspect that at the country level, there's a fair amount of interaction and cooperation among AID representatives, FAO and World Food Program representatives, and those from Canadian agencies, Australian aid agencies. So you do have that kind of interaction, but the reports are filed separately.

AID sends in a report to AID, the Canadians to their home office, and so forth. Now, in our own instance, the AID reports are shared and available to the Department of Agriculture so that there is that interagency collaboration with respect to that reporting.

Mr. HALL. Are you in a position to assess the nonfood estimates?

Mr. HANRAHAN. No, Mr. Chairman. I am really not in a position to do that.

Mr. HALL. I understand. Thank you very much for coming and testifying. It was most helpful.

Mr. HANRAHAN. You are very welcome.

Mr. HALL. To complete our examination today of African famine relief and rehabilitation measures, we will hear from three expert witnesses. They are very qualified to address different critical elements of the situation.

Dr. Timothy Dondero is an epidemiologist with the International Health Office, Centers for Disease Control, in Atlanta, GA.

Dr. Dondero has done extensive work on health issues in developing countries, and has recently spent several weeks working in several relief camps in Sudan. He will report on the emergency health needs of the famine-affected population.

Dr. Dondero will be followed by Mr. George Radcliffe, assistant director for CARE. Mr. Radcliffe will discuss logistical constraints faced in managing emergency relief operations. Mr. Radcliffe's service in Chad as country director for CARE, as well as in other famine-stricken African nations, well qualifies him to address these issues.

The third panel member is Mr. William Schaufele, senior director for Africa with Catholic Relief Services, one of the largest private voluntary groups working in Africa. Mr. Schaufele joined CRS after serving as American Ambassador to Burkina Faso in West Africa. He was formerly Ambassador to Poland and an Assistant Secretary of State. Mr. Schaufele will outline some vital rehabilitation measures which must be undertaken now if we are to have any success in getting drought victims back on the road to a normal life.

We would ask you three members to come up. I believe we'll start with Mr. Dondero, then Mr. Radcliffe, followed by Mr. Schaufele.

STATEMENT OF TIMOTHY J. DONDERO, JR., M.D., INTERNATIONAL HEALTH PROGRAM OFFICE, CENTERS FOR DISEASE CONTROL, PUBLIC HEALTH SERVICE, U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Dr. DONDERO. Thank you very much, Mr. Chairman. I have prepared a formal testimony which, with your permission, I'd like to submit for the record and summarize briefly.

Mr. HALL. Without objection.

Dr. DONDERO. I'm Dr. Timothy Dondero, a medical epidemiologist in the International Health Program Office, Centers for Disease Control, U.S. Public Health Service, Department of Health and Human Services.

I appreciate the opportunity to discuss with you today the emergency health requirements encountered in the current famine refugee crisis in Africa. My discussion is based on personal observations at refugee camps in Sudan during March of this year, and on the findings of Public Health Service colleagues who have also recently served in Africa.

In describing the major health emergencies, I refer to the chief causes of death or serious disability. As usual, the most seriously affected group has been the young children.

Clearly, the major killer among the refugees and displaced persons has been malnutrition—protein-energy malnutrition. For someone dying of this condition, the terminal episode is usually an infectious disease, but the fundamental cause of death is acute malnutrition itself.

On the subject of malnutrition, vitamin A deficiency has been a very important problem in Sudan and probably in Ethiopia during the current crisis. If untreated, this condition leads to permanent blindness.

In addition to malnutrition, two other risk factors have been extremely important in the displaced populations: crowding and poor sanitation. Both foster the rapid spread of infectious diseases which more seriously affect malnourished individuals.

Diarrheal disease appeared to be the major infectious disease killer, especially of children. Diarrheal diseases are both more prolonged and more severe in malnourished individuals, and lead to death more rapidly. In several countries, cholera has also been important—at least temporarily.

A very serious preventable killer in December and January was measles, which is a well-recognized high-risk disease in malnourished persons. Estimates by reasonable observers suggest that as many as 40 percent of refugee children who contracted the disease in the border camps in Sudan died. Even under nonfamine conditions, measles is a serious disease in Africa, killing from 2 to 8 percent or more of infected children. Respiratory disease, particularly pneumonia, and probably whooping cough, has been another important cause of death for refugees.

Malaria appeared to be less a problem in the drought-affected populations than in other parts of Africa, at least before the rains began. There are several other noteworthy diseases which have had a more localized impact. These include meningitis in Sudan; typhus and relapsing fever in Ethiopia; and several specific vitamin deficiences, other than vitamin A deficiency which I've mentioned.

In summary, the leading causes of death in the approximate order of importance appeared to have been: acute malnutrition itself; diarrheal disease; measles; respiratory disease; malaria and other fevers. Most of these conditions are preventable or simply treatable.

In the current emergency, several of the conditions with the most serious impact may not have received the priority at first which in retrospect they've deserved.

Several lessons can be learned. The first and foremost health requirement during the emergency phase of the crisis has been food. Appropriate food in adequate quantities equitably distributed in a timely manner. Doctors, nurses, medicines and hospitals are distinctly not the first priority for a starving population. Food is the specific drug against malnutrition.

There are three components of the food response to severe malnutrition: the general ration, supplementary feeding, and intensive therapeutic feeding. These last two are resource intensive services aimed at those individuals who are already malnourished, the highest risk group. They are lifesaving measures, though, and must be considered among the top relief priorities.

Measles prevention through immunization is an absolute top priority for children in malnourished populations, especially for those in refugee camps or displaced person settlements.

Another top priority, at least in Eastern Africa, has been vitamin A prophylaxis on nearly a population-wide basis, in order to prevent blindness due to vitamin A deficiency.

The other major emergency health requirement which is essential in virtually all drought and refugee emergencies is control of deaths due to diarrheal disease through oral rehydration therapy.

There are three other essential provisions for refugees and displaced persons which should be signaled: water of adequate quantity and quality, shelter, and sanitation. To assure best application of these various requirements, two management factors are essential: first, early, rapid nutritional and health needs assessment, and second, commitment by the hands-on relief agencies of sufficient human resources to assure the emergency preventive and control services.

There has been a strong tendency to respond to refugee and displaced person emergencies with clinical services, doctors and nurses, field hospitals, outpatient clinics and medicines, at the expense of the more vitally needed and more effective preventive and control activities.

Early assessment of needs by experienced public health professionals can help determine and emphasize the priorities. Also, there is need for greater understanding of and commitment to the vitally important disease prevention and control activities by the relief agencies.

Many of the conditions have no doubt already improved in those areas where international relief efforts are under way. My comments were based on observations made earlier during the emergency phase of the crisis. But in summary, the highest priority emergency health requirements have been the provision of food and supplementary and therapeutic feeding, measles immunization, vitamin A prophylaxis, and oral rehydration therapy, plus two management issues, rapid needs assessment with continued monitoring and adequate allocation of resources to prevention and control activities.

This concludes my summary, Mr. Chairman. I would be happy, after the other panel members have spoken, to try to answer questions which you or other members of the committee may have.

RESPONSES TO QUESTIONS FOR TIMOTHY DONDERO, M.D.

QUESTIONS SUBMITTED BY HON. MARGE ROUKEMA

Question. In your testimony you state that blindness can be brought on by feeding the vitamin A deficient individual a diet not containing that vitamin, since the increased metabolism resulting from feeding causes the body's demand for the vitamin to increase rapidly. My question is, how prevalent are diets that do not contain an adequate amount of vitamin A? Is current vitamin A fortification of American food shipments adequate? Are vitamin A needs now being met?

Answer. In the current drought relief in Africa, and in most famine relief activities, the basic food intervention is the general ration. This is typically composed of grain, legumes and edible oils and contains virtually no vitamin A. The usual dietary sources of vitamin A, green and yellow vegetables and fruits, are scarce under drought conditions, and may be virtually unavailable to the poor and to refugees.

In a few areas, dry skim milk (DSM) is provided in the general take-home ration. In addition, DSM is typically a basic component of the supplementary and intensive therapeutic feeding programs. All of the DSM provided by the U.S. Government is fortified with vitamin A. Most of that from Europe is also fortified. For those drought victims who have access to and actually consume DSM in the general rations, or for the registered, clinically malnourished who are able to receive special feeding, the vitamin A in the diet should be sufficient to prevent aggravation of vitamin A deficiency resulting from re-feeding. However, the quantity of the vitamin in the diet is sufficient only to keep even with current needs, and disruption of the DSM feeding leaves the individual just as vulnerable to deficiency. The quantity of vitamin A from DSM in the diet is not sufficient for effective treatment of clinical deficiency disease (xerophthalmia).

The currrent vitamin A fortification of American-provided dry milk is adequate, but can only be as effective as the milk's distribution and regular consumption. The other U.S.-supplied foods (grain, legumes, oil) are not the types of food that are usually fortified with vitamin A.

In the absence of available natural vitamin A sources, capsules of 200,000 international units of the vitamin are the most practical method of preventing the deficiency. The capsules can be given to the population at risk once every 3 to 6 months. This is currently done in many famine relief programs in a number of seriously affected areas, particularly in refugee and displaced persons camps. It is not clear how well the vitamin A needs of scattered or village populations are being met. I understand that the American Government and certain American private voluntary agencies supply large amounts of vitamin A capsules for dietary supplementation. UNICEF also supplies the vitamin. It would appear now that supplies of the vitamin pills in Africa are reasonable. The limiting factor may be the logistics of adequate distribution to rural populations.

Question. Could you explain what inappropriate relief activities are and when and where they are likely to occur? Are these due to an inadequate understanding of camp needs? How can we improve in this area?

Answer. Inappropriate relief activities include activities which provide the wrong goods or services, or which dangerously ignore essential goods and services. Recent examples include: shipping large quantities of drugs which are nonessential, unsorted, or out of date; supplying huge quantities of processed food of low-food value (such as tea crackers to Sudan), or foods which are culturally unacceptable; providing primarily therapeutic clinical and hospital services to starving people without therapeutic feeding programs; ignoring measles vaccination and vitamin A prophylaxis of malnourished children; squandering needed resources on typhoid and cholera vaccination rather than sanitation and oral rehydration therapy for control of diarrheal diseases. Providing the wrong supplies uses up limited transportation resources, clogs port and warehouse facilities, and displaces appropriate supplies which are desperately needed. Not providing essential preventive health services and therapeutic feeding leaves camp populations highly vulnerable to epidemics and unnecessary dealth and disability.

Such activities usually stem from well meaning but inexperienced and uninformed donor groups. The activities are allowed to occur when host governments and the coordinating international agencies do not control the type of assistance permitted into the relief areas and do not require adherence to acceptable standards. Another potential cause of inappropriate relief is decision making outside the country of need regarding what assistance to send, with inadequate information about local conditions and needs.

In the current drought and refugee emergency there may actually be less inappropriate relief activities than in previous disasters. Donor countries and many relief agencies have learned from past experience, and there is more professional information available in international publications and better guidelines developed by the international agencies.

We can probably improve in this area by professionally supporting and strengthening the international agencies responsible for coordination of relief activities—UNICEF, UNHCR, WHO—as well by helping to develop better guidelines and training materials for the private voluntary relief organizations. (It should be pointed out, however, that the majority of these private organizations are not American, and are to some extent beyond our ability to influence.)

Perhaps the most useful way we can help improve international relief efforts is to maintain within the various U.S. Government agencies concerned a cadre of persons skilled and experienced in international relief work--nutritionists, sanitarians, public health professionals, logistics experts, et cetera—who could insure that adequate assessment of needs is performed, that U.S. Government-funded relief supplies and services are appropriate, and that current and past experience is evaluated to determine and record what lessons can be learned.

[The prepared statement of Dr. Dondero appears at the conclusion of the hearings, see p. 96.]

Mr. HALL. Thank you, doctor. I think we'll ask your colleagues on the panel to testify and then we'll call for questions.

Next is Mr. Radcliffe.

Mr. RADCLIFFE. Thank you, Mr. Chairman.

STATEMENT OF GEORGE RADCLIFFE, ASSISTANT EXECUTIVE DIRECTOR, CARE

Mr. RADCLIFFE. My written testimony has previously been submitted, and with your permission, I do have an additional statement that I would like to make.

Mr. HALL. Without objection.

Mr. RADCLIFFE. My name is George Radcliffe. I'm an assistant executive director with CARE. I've had the privilege of working with CARE for the last 22 years, 17 of which were spent in the developing world.

Last, in Honduras, and prior to that, Chad. Our organization has greatly expanded its presence on the African Continent. We are represented in 16 countries, including Mauritania, Mali, Niger, Chad, Sudan, Ethiopia, and Somalia, areas which are still very acutely affected by the drought or the drought and refugee situation.

During the last 12 months, our staff in Africa has been responsible for the movement of 675,000 tons of commodities. In so doing, CARE has responded to the request for this logistical expertise from AID, from OFTA, from DEC, UNHCR, and in addition, has responded to it's own programming needs.

The African Continent is a continent of many land-locked nations. This represents a very difficult challenge for those who are charged with commodity movements. The problem of landlocked situations is exacerbated by disperse populations, lack of infrastructure, and the concomitant cost increases that transport to those countries involves. Often, there's created a feeling of hopelessness, what can we do about the problem?

I am convinced that there are direct and cost-effective interventions that could be undertaken which are both developmental in nature and would also lead to resolving some of the problems that we are presently faced with.

To use Chad as an example: While a permanent bridge over the Chari River, which is one of the bottlenecks in getting food into Chad, would increase the speed of delivery of foods, and would reduce the transport costs, all-weather road connections to the potential bread baskets, of which there are two, Southern Chad as well as a lake area, might lead Chad to be self-sufficient in grains within a reasonable period of time.

During my career with CARE, I've seen two different and serious drought situations on the African Continent. Each time, reaction on the part of the donor, on the part of the public has been extremely generous and very massive. Regrettably, little seems to be learned from this; for as the emergency subsides, so does the level of interest, and the funding, of course, begins to dry up.

It is I think vital that we commit funds to an effort in preparedness. May I suggest that we begin planning now for the next drought which inevitably will come. To do everything—it's obviously an immense task—and I think what is required is a plan. If we were to look at the countries that are presently involved in the drought in the Sahelian Belt and identify the key elements which frustrate the movement of commodities, and analyze these and began, over the coming years to move to address these, to ameliorate them, then possibly we would face the next drought in a much more prepared situation.

Another aspect, and I think CARE, which has made a considerable name for itself in the logistical area, and that name of course is made by our people who work in this field, in the developing world, but I think that another aspect of preparedness is training. It seems to me that we should move to train personnel in how better to respond to the situation. We ourselves feel, although, as I said, we have a considerable staff of well-trained and onsite personnel, we could do more if there were a way to prepare more staff people, both national and our internationals.

That concludes my statement. I would be pleased to respond to any questions. Thank you, Mr. Chairman.

Mr. HALL. Thank you, Mr. Radcliffe. We'll go on to the next witness, the last witness, and then there will be a number of questions that we'd like to pose.

[The prepared statement of Mr. Radcliffe appears at the conclusion of the hearing, see p. 106.]

Mr. HALL. Mr. Schaufele. Is that the correct pronunciation, sir?

Mr. SCHAUFELE. That's correct. Thank you.

STATEMENT OF WILLIAM E. SCHAUFELE, CATHOLIC RELIEF SERVICES

Mr. SCHAUFELE. To follow the lead of my predecessors, I will summarize my statement. If you have no objection.

Mr. HALL. Without objection, your statement will be entered in the record.

Mr. SCHAUFELE. As I did in the opening of my prepared statement, I just want to stress the fact that I'm not a development expert, but I spent 17 years in African affairs, both in Africa and the United States and I think I have some understanding of the general problems.

I think the immediate need and the humanitarian impulse of the world did galvanize us to swing into action to provide food for those so adversely affected by the current round of drought and famine. And despite what we have learned from past experience in the organization and implementation of famine hunger programs, there's still no automatic and effortless way to assure the most efficient and effective shipment, storage, and distribution of food stocks.

Organizational, material, political, and other considerations affect the delivery systems. Catholic Relief Services without curtailing, and even while expanding its relief efforts, is increasingly turning its attention to rehabilitation and, in the long run, development projects, mostly related to agricultural development and production. We must look beyond the immediate situation so that those people so adversely affected can once more become independent and productive members of society.

But simply to expect them to return to their home areas and resume their activities as before is neither practical or humane. We know the stocks of seed grain are seriously depleted because hungry people have had to consume them, and that the procurement of seed, especially that most suitable for the conditions of the region has proved difficult and costly. Supplies of agricultural implements will have to be augmented. Adequate supplies of water are necessary.

It will be necessary to monitor and treat the deleterious after effects of malnutrition. And adequate supplies of food are still necessary at least until the harvests are in.

One effect of the drought overlooked by some, is the decimation of the work animal population, which was seriously reduced by consumption and death due to lack of feed and water. They cannot not be speedily replaced, especially with animals which were able to live and flourish in the conditions of the area. Recently, in Ethiopia, I learned that the price for the few animals now available has increased tenfold or more.

Private voluntary organizations, foreign governments, and international organizations can operate programs only with the cooperation of the host governments, which may have additional considerations dictated by national political economic and social perceptions, not always readily appreciated or understood by the international donors.

Yet, the taxpayers of donor countries and the generous individual and organizational donors to private groups, understandably become impatient, even disillusioned, if they see such considerations hindering the effectiveness of relief and rehabilitation programs.

While only governments and large international institutions can furnish the overwhelming preponderance of the necessary resources, Catholic Relief Services has earmarked $30 million of its own funds for Ethiopian rehabilitation programs in the fields of agriculture, water and sanitation, health and medicine, and the necessary logistic organization to implement these programs. When one realizes it costs $156 just to get 1 ton of grain from an Ethiopian port to those who are starving, and that the 1984–85 shortfall in Ethiopia, alone, is estimated at almost 2 million tons, we learn what the magnitude of the problem is.

And so CRS is looking farther down the road. We have established a special working group which is exploring future development possibilities with the aim of achieving two objectives: the first, we are working with other private voluntary organizations to establish the basis for effective future cooperation and effort. We see this as a way to eliminate waste and duplication, but more important, to pool and coordinate our talents and resources to accomplish lasting progress.

We are encouraged by this. Participating PVO's will retain their own identities and their own programs. What we seek is cooperation, coordination, even cofinancing on projects and programs which lend themselves to such an approach.

The second track, linked to the first, consists of intensive consultations to develop a longer range development strategy for PVO's than has been the case in the past. It, too, is designed to promote effective African development, firmly based on what is acceptable in African terms, and relying on full partnership with African institutions upon which true progress ultimately depends.

As proof of our own commitment, we have earmarked $20 million of our own funds for this purpose. We also use Government resources, and we strongly believe in this partnership which reflects the intents of Congress and the kind of cooperation so highly valued by many Americans.

We hope, that in the pursuit of our common aims, that we can count on the reinforcement of this cooperation which depends, in large part, on the commitment, predictability, and consistency of Government programs and financing.

CRS also strongly supports the replenishment fund for the International Fund for Agricultural Development, one of the most effective U.N. Organizations in the development field. And we hope that final approval by Congress and the administration will be forthcoming.

In development, we're dealing with people, and the complexity of human relationships and of how societies operate, especially those of which we understand too little, do not make our task any easier. The explosion of sympathy, even horror, over the human suffering in Africa has indeed resulted in an outpouring of material and financial assistance. But the immediate relief which that aid helped finance is, in terms of human and material resources, only a minor part of what will eventually be needed if we are to make even a dent in the basic causes of such disasters.

If this committee in its hearings and publications, can dramatize the realization of the fight as only begun, maybe that flow of assistance can be maintained, and even expanded. Thank you, Mr. Chairman.

Mr. **Hall**. I want to thank all of you for coming and agreeing to testify.

We normally don't do things in this manner but I am asking our primary staff people involved with the African famine crisis to join me. They will participate in asking questions.

We have with us Mr. Ernest Loevinsohn, staff director of the Hunger Committee. We also have Jeffrey Clark who is chief staff person on the international side of the select committee. And we have Mr. Ray Konan, the minority staff director.

So, if we can, we will get right into some questions.

[The prepared statement of Mr. Schaufele appears at the conclusion of the hearing, see p. 113.]

Mr. Hall. The first question I'd like to ask concerns the transportation of the food assistance. How do you handle this great frustration over the logjams and the delays that are hampering efforts now, and particularly in Ethiopia and Sudan? How do you coordinate the transportation problem with the Agency for International Development?

How do all of you work together?

Mr. Radcliffe. Well, CARE entered Ethiopia about a year ago. We have since bought our own truck fleet that handles the needs for the program that we have in the Harargare area, so we are somewhat limited. In other words, we're not working all over the country as we are in the Sudan.

We're working in a certain area and we don't have the problem with it at the moment. There certainly are at times difficulties at the port. Now, the Ethiopian Government in an effort to try to overcome these problems, has asked us to help them with a computer operation that would work with the donors, the reception of commodities and the outgoing commodities, in other words, to make it a more rational delivery system.

And that is in progress, and, hopefully, will be onstream before long. We hope that this will do a great deal to resolve the block that does occur at the ports. Now, in the Sudan, very much like AID, we are hiring trucks. There is a very large trucking fleet available in the Sudan which is presently not being utilized because in normal times it's utilized for agricultural commodities, of which there are very few at the moment.

So we are using commercial trucks and hauling food both to the eastern area, which is both national Sudanese who are suffering from the drought, as well as Ethiopian refugees, and also to the western part of the country, to the Kordafan area, which is the area that adjoins the poor area that you heard about earlier.

Does that answer your question, Mr. Chairman?

Mr. Schaufele. I think as far as CRS is concerned, we have been adversely affected by the transportation problem in Ethiopia. We do not have, incidentally, a program in the Sudan at this time, although we're considering one.

We have worked with other agencies in Ethiopia, some of which have their own trucks, and we have taken now two initiatives ourselves with the support of USAID. One is we have purchased trucks which will be used for the transportation of food into the northern parts of Eritrea, and we're on the verge of signing a lease for a project which Mr. McPherson mentioned this morning for leased trucks, personnel and other material from Kenya, which when it swings into full action will be able to move 10,000 to 15,000 trucks a month.

We, too, have heard that there may be some difficulties on the Ethiopian side with this arrangement, but we have nothing concrete at this particular time.

Mr. HALL. To follow up on this question, when you're organizing the transportation—CARE, World Vision, Catholic Relief Services, and all the PVO's—do you make joint assessments? In other words, if you've got a particular problem in Western Sudan and you need such a large number of trucks, how does that all work?

I'm concerned that everybody is working together to solve the problem. In your opinion, is that happening?

Mr. RADCLIFFE. Mr. Chairman, I think it is happening. However, to further explain the situation, for example, in Ethiopia the voluntary agencies have certain sectors in which they work, so each voluntary agency knows what the other one is doing and work very closely with representatives of other nations, of AID, or whoever.

But the problem doesn't arise because there are sectors for which a voluntary agency has responsibility. Now, in the Sudan it is different. In this case Catholic Relief is not represented, but we are doing our own programs, and we are also working with the EEC, with AID, with UNHCR to coordinate the national transport.

Now, Mr. McPherson mentioned that the United States was programming in excess—or planned to program in excess of 1 million tons. Well, we're hauling about 400,000 tons in the Sudan, so someone else is hauling the other 600,000. So there is a great deal of coordination that obviously needs to take place.

We do not, however, in the Sudan also have the province that adjoins Chad—it is, I believe, handled by another voluntary agency. We're not hauling food to that, but we are hauling to the next two in, which are the Kordafan provinces.

So, to answer your question, it's yes. The coordination is there.

Mr. SCHAUFELE. I think there is coordination. I would draw one distinction, that CRS also is working directly with Ethiopian organizations, Ethiopian partners, who use their own influence and resources for their own transportation needs.

But we also work with the Lutheran Federation, for instance, in Ethiopia, and I think there is pretty good coordination insofar as we all have somewhat different problems because of this division of the country into areas of responsibility.

The road to Makelle, for instance, in Eritrea has not been opened since February 10, and now it's being airlifted about half of what is needed.

Mr. HALL. Mr. Clark. Any questions?

Mr. CLARK. Thank you, Mr. Chairman. I want to go back to the health area for just a minute and address a question to Dr. Dondero. In order to do the job the way it ought to be done, I'm interested in the scope, the cost range, a proper emergency health program required for, say, Sudan, where you've been, or Ethiopia. In Ethiopia apparently there are a little over 7 million people directly affected by this famine. What needs to be done to meet those health requirements?

My question is really not so much what is going to be done with the present resources available, but what ought to be done.

Dr. **Dondero**. Thank you, Mr. Clark. I'm afraid that I don't have direct information from Ethiopia. We had one person from the Centers for Disease Control working in Ethiopia, and for a number of reasons he was able to visit only one camp area. We do not know how typical or atypical that is.

Also, in my own experience and that of my agency, the Centers for Disease Control, we don't tend to deal in cost figures. We're more involved in assessing the particular types of needs. I'm afraid I'm not going to be able to give you dollar figures.

In terms of needs, what ideally was needed earlier this year as the crisis really reached enormous proportions in the Sudan and Ethiopia was perhaps a greater recognition by both the national agencies—in Ethiopia, the Relief and Rehabilitation Committee, in the Sudan, the Office of the Commissioner on Refugees—and the international agencies involved, UNICEF, WHO, UNHCR, of the need to help the implementing agencies focus their attention on the priority public health aspects early on. These include the extremely important therapeutic and supplemental feeding, as well as the general ration, the control of diarrheal disease by simple rehydration therapy, immunizations and so forth.

I don't think that from the outside, even from a major donor country, we can really impose what we see as the proper way. We can recommend, we can only work with the international agencies and with national governments themselves in focusing attention on the preventive measures.

But I do agree with Mr. McPherson that the primary response in a nutritional emergency, which this has been, regardless of the civil war, is food. The health issues are extremely important, but without the food, measles vaccination, for example, simply means the malnourished child dies of diarrhea or some other terminal event.

Mr. **Clark**. Is it true, however, that about half the deaths now occurring in the camps, even now, could be averted by universal immunization?

Dr. **Dondero**. I don't think the deaths currently occurring are predominantly preventable by vaccination. The information I have is only from Sudan over the last few months. The predominant cause of death has been diarrheal disease. If you included the period from about December onward—including the measles epidemics—you could have averted an appreciable proportion of deaths, though. I'd be unwilling to suggest as much as half, by immunization, particularly measles and the post-measles complications including prolonged diarrhea. I don't think that immunizations could have dealt with as much as half of the deaths. A very important chunk, perhaps a third, but probably not half.

Mr. **Clark**. Thank you, Doctor. I also have a question for Mr. Radcliffe, if I could. We're trying to understand how things are going to be going in this relief effort a few months from now. Our understanding is that in the next fiscal year, AID has plans to fund 50 percent of the inland transportation costs of food distribution programs undertaken by the PVO's.

Logistical problems you have outlined are very expensive. Can you comment on the PVO's ability to cover these additional costs? Mr. Schaufele may also have comments on that.

Mr. **Radcliffe**. Mr. Clark, let me start it off by an example and use Chad as that example. Chad is a landlocked country receiving its food in two ports that are between 1,500 and 2,000 kilometers away. When I was working in Chad, which is now 5 years ago, to move a ton of food cost in excess of $200. That's to get it to Chad, to Djimena. To then move it out could cost anywhere up to $150 a ton.

So we're talking about $350 a ton to get food from, let's say the port of Douala, to the recipient somewhere in Northern Chad. Voluntary agencies for the most part simply do not have that kind of money. There's no way that I think a voluntary agency can raise that sort of money.

We're talking about millions of dollars that are required. If you're talking about a small program, that's something else, but right now we're talking about massive commodities, and it takes massive amounts of money to pay for that.

So I think that, speaking for CARE and I think for other voluntary agencies, it would be most difficult if they were asked to put up that other 50 percent.

Mr. **Clark**. The increased donations that you and the other PVO's have received as a result of all the attention on the famine would not put you in a position to cover such cost, is that what you're saying?

Mr. **Radcliffe**. In my opinion the answer is it would not.

Mr. **Clark**. Mr. Schaufele.

Mr. **Schaufele**. The change of a system to 50 percent financing for transport is obviously a change, and it's a considerable change which affects the PVO's, which have traditionally and over a long period of time been the distributor of title II emergency food relief.

So the change seriously affects the PVO's. For this fiscal year, if we had to pay 50 percent of the in-line transportation costs of the grain which we distribute in Ethiopia, it would cost us $11.5 million.

For the next fiscal year, the amount of grain that we have proposed, it would cost us $16 million. That eats up practically—for all practical purposes some of the—a good deal of the increased donations which we've mentioned, and I don't have to tell you that givers, donors, people who respond in emergencies normally expect their money to go for the product.

They don't think of transportation costs, and we do get earmarked contribution letters. I got one yesterday. A woman called up from Maine and said she collected—I forget how much money, and she wanted to use it to buy a truck.

Well, we're very happy to do that, but that's a rather unusual reaction. But in our opinion, since the PVO's are the main distribution agencies for emergency food relief, the continuation of the past system seems to us to be the most logical one.

Mr. **Clark**. Well, by reducing the amount of money available for inland transportation, would not the end result be or at least could it not be reduced feeding programs?

Mr. **Radcliffe**. Could it not be——

Mr. **Clark**. Reduced feeding programs? If you simply don't have the money for the transport, then the feeding programs could be reduced.

Mr. **Radcliffe**. Well, that's right. We would really have to close down a good part of our program if we had to pay 50 percent of the transport costs.

Mr. **Clark**. May I ask a question in another direction, Mr. Schaufele? I want to go back to the rehabilitation theme that you were addressing before. This is a question without a precise answer, I realize. Conditions vary, but I'm hoping you can tell us how long people can be in these camps away from their lands and their homes without permanently disrupting their lives.

We're concerned about artificial dependency and destroying people's will to survive, their spirit. Does the experience of CRS or CARE allow you to address that kind of question?

Mr. **Schaufele**. Well, I think in terms of CRS I'm not clear that anybody can really give any very specific answer. My own experience is that 1 year or possibly 2 doesn't cause the great dislocation of people's lives, especially when people are displaced within their own countries.

When you get into refugee situations, where people don't know when they're going to be able to return to their countries for other reasons than food emergencies, in other words, for political or other reasons, then that's a little different kind of case and a little different kind of psychology is operating.

But I would guess, as horrendous as that sounds, if people would stay away from their homes for 1 to 2 years that they are very attached to their home regions, and even when improved conditions exist, if not the best conditions, they will start to drift out of the camps and go home anyway, even though the conditions are not what they would really expect to have under normal circumstances.

Mr. **Clark**. Thank you.

Mr. **Hall**. Mr. Konan. Any questions?

Mr. **Konan**. Thank you, Chairman Hall.

Mr. Radcliffe and Mr. Schaufele, can you outline for us the extent to which the Government of Ethiopia has cooperated with your efforts or interfered with your efforts to meet the emergency food needs in the northern provinces of Tigre and Eritrea in Ethiopia?

Mr. **Radcliffe**. Well, as concerns CARE, as I said earlier we are neophytes in Ethiopia. We opened our program there last fall, and have worked in the particular area of the country and have not had serious problems with the government or with its restrictions.

Now, it is my understanding that there are obviously problems in trying to get into the north, and we are not working in the north, and we have no magic formula. You know, when the corridor discussions were opened, we offered ourselves to be involved in that.

It has not worked out. Hopefully, the latest scheme will allow movement of commodities into those areas. So I think, other than the International Red Cross, I'm not sure that anybody is being allowed into those areas. Maybe my colleague from CRS has a more detailed understanding of that.

Mr. **Schaufele**. We don't operate in Tigre. A couple of months ago there was obviously a fairly significant outbreak of fighting, which would have hindered relief operations in any case. But there has been a basic, probably, attitude of the Ethiopian Government, which is not favorable to the kinds of programs which we might conduct in other areas.

However, the so-called northern initiative, which we call it, the Ethiopian Government has agreed that we can conduct operations in the northern part of Eritrea and we have brought in the trucks, and we'll be moving the grain initially up into 3 or 4 more or less urban centers, from which it will be distributed to other outlying areas, and eventually we will be increasing it to 10.

And whether the Ethiopian Government is enthusiastic about this program or not, they haven't put any blocks in our way.

Mr. KONAN. Do you think there's anything more that the Congress can do, or the AID people, perhaps the Department of State, to help assure that the northern areas, where people are in just as great a need as other areas, are open to the relief efforts?

Mr. RADCLIFFE. Mr. Konan, that's a difficult area, I think, for a representative of a voluntary agency to address. Obviously there are pressures that the U.S. Government can bring to bear that may be important in the views of those that run Ethiopia that would lead to a more benign response to getting commodities into those areas.

Perhaps the U.N. would be a better medium for accomplishing this. I really don't know how else to respond to that.

Mr. SCHAUFELE. Well, obviously Congress always plays—can always play a helpful role in these things. The question is, what is the reaction, since as I indicated in my statement we're subject to the restrictions or reservations put on us by the host government.

What will be the reaction of the host government to congressional action, and it would be hard to—and I answer this question more in terms of my diplomatic experience, it would be hard to predict that unless we knew more precisely what Congress might have in mind.

There are situations which—there are things which could be done which could exacerbate relationships, and things that could be done which might improve them. But I agree with my colleague that the U.N. is very often the best channel for this kind of pressure.

We often grow impatient with the United Nations too, but we have to remember that they are subject to the dictates of 156 members, so they conduct their diplomacy, if you want to call it that, in somewhat different ways than sovereign states do.

Mr. KONAN. The Select Committee on Hunger is charged by the Congress with making recommendations to help alleviate the problems of hunger and malnutrition, not only in the United States but internationally. You gentlemen represent organizations that deal with the extraordinary difficulties of relieving hunger and malnutrition in Africa. Do you have recommendations that you would make to the members of the committee, as they consider their own recommendations to the Congress?

Mr. RADCLIFFE. Mr. Konan, definitely. I think that we should begin—you know, the drought in Africa, as I said earlier, there was one in 1970, there was one in 1980, I think it's reasonable to expect there will be one in 1990.

We ought to look at each country individually and look at what the blocks are now. In other words, there's port congestion, there's a railroad that breaks down, there's a bridge across the river that's missing, and see what can be done about those things.

And on a larger scale, I think we ought to look at what is available in the country that can be developed there to avoid this type of situation. Chad happens to be a good example. It's one of the poorest countries in the world. At the same time, in the Lake Chad area, there's a tremendous agricultural resource, but there are no roads.

The whole country has 250 kilometers of paved road. That's all there is, and much of that has been destroyed by the recent revolution. Well, there's no road network, so if you grew all the grain that you wanted the only way to get it out would be by airplane.

So maybe we should look at putting in a system of roads that would be all weather, that would allow Chad to move its commodities from the lake area to those areas where the food is needed.

It's the same way from the other side. Southern Chad is an area that's quite fertile, and in reasonble times, in good times, in normal times, quite sufficient commodities are produced for most of the country, maybe not for all but for most.

What could be done to further develop that? And if we looked at each country individually and analyzed what could be done both in a mechanical sense; in other words, fix the railroad, fix the bridge, but also in the long term.

What is there that can be done? We may come up with some countries where the answer is there's nothing that can be done. That's a possibility, but I think a plan, a country plan, is important.

Mr. **Schaufele**. Well, my colleague has addressed primarily the relief question, and a future drought, which I agree can be anticipated in the fairly short term. And I tend to look at it in the somewhat longer view in terms of agricultural development, that for a lot of the reasons that we've heard today has not been very productive.

The reasons are not just technical, the reasons are also political. I put them there because the research institutions are not very good at field testing. They tend to be very theoretical. We have the question of government pricing policies.

But seriously, my experience is that the peasant, the farmer knows what to do if he has an incentive to do it. Certainly a serious block will seriously affect his ability to produce, but under normal circumstances, and even when things are tough, the farmer knows what to do.

But if he's not going to get any compensation for it, he's not going to produce for anybody but his own family or close friends and that sort of thing. So that's one of the problems, and we tend to think that a greater effort should go into this.

We're consulting with Norman Borloff, who has now some ideas about the development of research, field research, in Africa, which might speed up the process, but it's going to take some kind of a coordinated effort on the part of PVO's, but PVO's have very limited resources and cannot build infrastructure, for instance.

And so there has to be ideally a coordinated international effort which can strike at all these problems, hopefully simultaneously.

Mr. KONAN. Just one final question: there seems to be a great ground swell of interest across the land, in church groups, the engineers' consulting organization, others, to help in some way with the famine in Africa.

Do the private voluntary organizations have sufficient mechanisms in place to fully utilize all of this enthusiasm and desire to help? I think this goes beyond the impersonal thing of writing a check, but reflects a desire to be personally involved in ongoing efforts?

Do you have comments on that question?

Mr. RADCLIFFE. Mr. Konan, I suggest that whatever there is, it isn't enough. I think you're absolutely correct. I was fortunate enough to be one of the few gray-haired people at the concert in Philadelphia last Sunday, and I was singularly impressed by the tremendous emotion and good will that was expressed by the young people, the 90,000 young people that were there.

I would like to be able to say to you yes, we're tapping all that energy and all that concern. We're tapping some of it, and our fundraisers are quite aware of it. There are more volunteers, I think, that are coming out to try to help us raise money.

So it's a growing effort, and I hope that it will continue, but are we getting them all? No.

Mr. SCHAUFELE. I agree that we're not getting them all either, and I think we're doing better, but certainly there's more out there.

One of the things that we try to do is, we cannot meet the requests which were made of us for projects in Africa, and one of the things that we try to do is select the ones that we can do and then suggest that other donors might fund specific projects.

There's one, really almost one parish up in Connecticut which has raised almost $400,000 to build catchment basins and small dams in Burkina Faso. That kind of—you give a group which is willing to raise money a specific project, and very often you get a much more rapid and successful effort than if you just say "Send us all the money you can."

And that's one of the reasons we try to get people involved, and that's been pretty successful.

Mr. HALL. Mr. Loevinsohn, do you have questions?

Mr. LOEVINSOHN. I have one very quick question I'd just like to ask of the panel. Chairman Hall has stressed that our focus today is on the nonfood side, medicines, vaccines, transport, and logistics. Do you see the needed level of assistance as we look over the next 6 months to a year in this nonfood area, do you see the needs increasing, decreasing, or remaining about the same?

Dr. DONDERO. If I could address those issues related to health services, I would not anticipate at this point any increase in the needs over what exists at present. In particular for those areas where large numbers of people are currently displaced, let us hope, the problems may start decreasing with the rains.

I think in the health field it's not so much a question of the quantity or as much as the allocation of the money, the infrastructure, the policies, to some extent the professionalism in the health support to famine victims. There are problems with personnel, limitations in available personnel. Also particularly there's a real problem in infrastructure, and the logistics to support those relief personnel. If I could harken back to the question asked just a moment ago concerning the enthusiasm of people to volunteer their efforts and energies. One of the problems in health delivery in disaster areas is that many people who wish to help—who have a lot of energy and ability, and good will, are available only for a relatively short time: the physician who can get 6 weeks off his practice to go and do some good, for example. The problem is that people with that short a stay in the field often aren't able to contribute very much. It takes such significant amount of time to get them in, to get them processed and oriented, to have them familiar with things, that they are not able to really apply their abilities.

You need a longer term commitment, and some of the countries are now insisting on an absolute minimum of 3 months, with preference actually for 6 months, as the voluntary agencies have learned. You need longer term involvement of the individuals.

So that's a constraint also, and that is one of the problems in terms of the focus on public health. You tend to have a fairly high turnover in health relief personnel.

So I would say the needs are going to continue in terms of the services. I don't see that it's an increased financial need. There is a fair amount of financial resources for health. It's more how those resources are used.

Mr. **Loevinsohn**. Mr. Chairman, I have no more questions.

Mr. **Hall**. Thank you.

That will conclude our hearing. We are most thankful for all of your testimony. We want to keep the record open, for we know that INTERACTION, a coalition of over 100 American private agencies conducting relief and development programs in Africa and other developing areas, wishes to submit a statement.

The record will also remain open for further questions. Again, we're most thankful for your testimony and your views.

We thank you very much for you helping us as we struggle with relief and rehabilitation assistance questions. I'm sure that we will be using this information in the best possible way as we consider legislation, and as work with the administration and with the relief organizations.

Thank you all sincerely.

[Whereupon, at 12:45 p. m., the hearing was closed.]

[Material submitted for inclusion in the record follows:]

PREPARED STATEMENT OF HON. TONY P. HALL, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF OHIO

GOOD MORNING, LADIES AND GENTLEMEN, MY COLLEAGUES. OUR SELECT COMMITTEE ON HUNGER CHAIRMAN, MICKEY LELAND, HAS ASKED THAT I CHAIR THIS HEARING AS CHAIRMAN OF THE COMMITTEE'S INTERNATIONAL TASK FORCE. I AM PLEASED TO DO SO AND PLEASED TO WELCOME YOU HERE. ALL OF US LOOK FORWARD TO THE TESTIMONY AND THE OPPORTUNITY TO DISCUSS THE CRITICAL ISSUE OF THE CRISIS IN AFRICA WITH OUR DISTINGUISHED AND EXPERT WITNESSES. LET ME THANK YOU ALL IN ADVANCE FOR BEING AVAILABLE FOR THIS DISCUSSION AND FOR YOUR EFFORTS TO ASSIST MEMBERS OF THE SELECT COMMITTEE AS WE EXAMINE SOME OF THE CRITICAL ISSUES CONNECTED TO THIS ONGOING TRAGEDY.

THE HUMAN CATASTROPHE NOW UNFOLDING IN AFRICA TRACES ITS ORIGINS THROUGH A COMPLEX SERIES OF NATURAL CAUSES AND HUMAN ERROR THAT BEGAN YEARS AGO. THE ROOT CAUSES OF THE CURRENT FAMINE ARE WELL KNOWN -- POVERTY, LOW HEALTH STANDARDS, INTENSE POPULATION PRESSURES, ENVIRONMENTAL DECLINE, AND ECONOMIC AND POLITICAL DISLOCATION.

LAYERED ON TOP OF THAT FRAGILE BASE HAS BEEN A THREE TO FOUR YEAR DROUGHT OVER VAST STRETCHES OF THE CONTINENT AND THEN AN INITIAL FAILURE ON THE PART OF AFRICAN AND DONOR COMMUNITY GOVERNMENT OFFICALS TO DETECT INDICATORS OF IMPENDING FAMINE. THE RESULT OF ALL OF THIS IS NOW WELL KNOWN TO US AND THE WORLD.

NEARLY A YEAR AGO WE WERE ALL SHAKEN BY OF THE REALITY OF THE FAMINE. PICTURES OF EMACIATED ETHIOPIAN CHILDREN SUDDENLY WERE HAUNTING US ON THE TELEVISION NEWS. REPORTS OF HUNDREDS, PERHAPS, THOUSANDS OF DEATHS FROM STARVATION PER DAY WERE BEING RECEIVED FROM RELIEF AGENCY PERSONNEL IN THE FIELD. RELIEF CAMPS, OR MORE ACCURATELY IN SOME CASES, DEATH CAMPS, APPEARED ALMOST OVERNIGHT WITH THOUSANDS AND THOUSANDS OF DESPERATE AND DESOLATE FAMILIES SHIVERING FROM HUNGER AND EXPOSURE, HOPE EXTINGUISHED FROM THEIR EYES. I SAW THIS TRAGEDY MYSELF LAST NOVEMBER; THE SIGHTS WILL NEVER BE FORGOTTEN.

WE REACTED FIRST WITH HORROR, THEN WITH ACTION. ONE OF THE MOST MASSIVE AND INVOLVED RELIEF OPERATIONS IN THE HISTORY OF THE WORLD WAS LAUNCHED. THE UNITED NATIONS, VIRTUALLY ALL DONOR GOVERNMENTS - MOST IMPORTANTLY THE UNITED STATES -- AND COUNTRIES NORMALLY NOT IN A POSITION TO OFFER ASSISTANCE OF THIS NATURE, SUCH AS INDIA AND CHINA, BEGAN MOBILIZING. VAST AMOUNTS OF FOOD AID SOON WERE ENROUTE TO THE DEFICIT COUNTRIES. I AM TOLD THAT IN THE PAST YEAR, U.S. GOVERNMENT FOOD ASSISTANCE TO THE FAMINE-STRICKEN AFRICAN COUNTRIES EQUALS 28 AND 1/2 POUNDS OF FOOD CONTRIBUTED FOR EVERY AMERICAN CITIZEN.

THE CONTRIBUTION OF FOOD COMMODITIES IS NOT, HOWEVER, THE ENTIRE STORY

AND DOES NOT MEET ALL THE EMERGENCY REQUIREMENTS IN THE FIELD. JUST AS FOOD IS DESPERATELY NEEDED, SO IS THE TRANSPORT AND MANAGERIAL CAPACITY TO MOVE IT, STORE IT AND DISTRIBUTE IT. EMERGENCY HEALTH AND WATER PROGRAMS ARE URGENT COMPONENTS OF THE RELIEF OPERATION. TOOLS, SHELTER BLANKETS, AND MEDICAL SUPPLIES ARE ESSENTIAL. NON-FOOD RELIEF MEASURES TAKE ON INCREASED IMPORTANCE IN COUNTRIES SUCH AS ETHIOPIA, THE SUDAN AND CHAD, WHERE LOGISTICAL CONSTRAINTS SO COMPLICATE OPERATIONS.

FAMINE RELIEF OPERATIONS ARE AT A CRITICAL JUNCTURE IN MANY AFRICAN COUNTRIES NOW. RAINS HAVE RESUMED IN CERTAIN AREAS, BRINGING BOTH THE PROSPECT OF RECOVERY AND THE THREAT OF INTERRUPTING EMERGENCY OPERATIONS BY MAKING ROADS IMPASSABLE. WE MAY BE ON THE VERGE OF A CATASTROPHE IN WESTERN SUDAN WHERE SEVERAL MILLION PEOPLE DEPEND ON A FRAGILE, INADEQUATE DISTRIBUTION SYSTEM. FOOD DISTRIBUTION PROGRAMS HAVE BEEN LAUNCHED IN NORTHERN ETHIOPIA, WHERE THE POPULATION SUFFERS FROM CIVIL CONFLICT AS WELL AS DROUGHT. THE IDENTIFIED NEEDS AND THE ENORMOUS REQUIREMENTS TO SAVE MILLIONS FROM A CERTAIN DEATH MAY REQUIRE ADDITIONAL FUNDING ON THE PART OF THE CONGRESS.

THE SELECT COMMITTEE ON HUNGER CALLED THIS HEARING TO GET AN ASSESSMENT OF CURRENT RELIEF AND REHABILITATION OPERATIONS AND TO REVIEW PROJECTIONS OF FURTHER STEPS WHICH MUST BE ORGANIZED. IT SHOULD BE CLEAR TO EVERYONE THAT OUR COMMITMENT TO AN ADEQUATE RESPONSE TO THIS CRISIS CONTINUES. OUR RESPONSIBILITIES ARE NOT YET MET.

ARE THERE OPENING STATEMENTS FROM MY COLLEAGUES?

IF NONE OF MY COLLEAGUES HAVE OPENING STATEMENTS, WE WILL PROCEED WITH THE INTRODUCTION OF OUR FIRST WITNESS.

PREPARED STATEMENT OF HON. MARGE ROUKEMA, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF NEW JERSEY

MR. CHAIRMAN:

THIS MORNING THE SELECT COMMITTEE ON HUNGER CONTINUES ITS STUDY OF THE AFRICAN FAMINE - ONE OF THE GREAT TRAGEDIES OF THIS DECADE. MILLIONS OF PEOPLE ON THE AFRICAN CONTINENT ARE SUFFERING FROM FAMINE AND DISEASE. WHEN I VISITED ETHIOPIA LAST YEAR WITH SOME OF MY COLLEAGUES, INCLUDING THE DISTINGUISHED CHAIRMAN OF THIS COMMITTEE, MR. LELAND, I SAW IN GRAPHIC, HEART-RENDING DETAIL THE DEVASTATION OF HUMAN LIVES. THOSE WHO SURVIVE CONTINUE TO SUFFER. ALONG WITH DISEASE, THEY ENDURE THE THREAT OF IMPENDING DEATH IF EMERGENCY FOOD DONATIONS CEASE OR IF THE DELIVERY SYSTEMS FAIL FOR ANY REASON.

THAT THREAT MAKES MORE EVIDENT THE NEED FOR OUR CONTINUED RELIEF EFFORTS. MILLIONS HAVE BEEN SAVED FROM DEATH AND DISEASE BY THE EMERGENCY ASSISTANCE EFFORTS OF THE UNITED STATES, ALONG WITH OTHER DONOR NATIONS, INTERNATIONAL ORGANIZATIONS, AND PRIVATE VOLUNTARY ORGANIZATIONS. OUR COUNTRY'S RESPONSE TO THIS HUMAN CATASTROPHE HAS BEEN EXEMPLARY. AT PRESIDENT REAGAN'S INSISTENCE, OUR OFFICIAL EFFORTS HAVE BEEN SECOND TO NONE IN THE INTERNATIONAL COMMUNITY. THE CHARACTERISTIC GENEROSITY OF THE

AMERICAN PEOPLE HAS MANIFESTED ITSELF IN AN OUTPOURING OF CONTRIBUTIONS TO THE VARIOUS PRIVATE VOLUNTARY RELIEF AGENCIES. WE, AS A NATION, CAN BE VERY PROUD OF THIS.

OUR FIRST WITNESS THIS MORNING, AID ADMINISTRATOR PETER MCPHERSON, AND HIS AGENCY FOR INTERNATIONAL DEVELOPMENT ARE LARGELY RESPONSIBLE FOR THE SUCCESS OF THE MASSIVE EMERGENCY ASSISTANCE PROGRAMS OF THE UNITED STATES. YOUR COMMITMENT AND DILIGENCE, MR. MCPHERSON, IN ATTEMPTING TO OVERCOME THE HINDRANCES TO TIMELY AND EFFECTIVE RELIEF, I BELIEVE DESERVES OUR COMMENDATION.

THE CHALLENGE WE FACE AS A DONOR NATION, IS NOT ONLY TO GIVE WHAT IS NEEDED AND READILY USEABLE, BUT ALSO TO ENSURE THAT WHAT WE PROVIDE GETS TO THOSE WHO NEED IT. SOME NEWSPAPER AND COMMENTATOR ACCOUNTS WOULD GIVE THE IMPRESSION THAT U.S. ASSISTANCE IS PLAGUED WITH PROBLEMS AND FRUSTRATIONS. SOME HAVE BEEN CAUSED BY MISDIRECTED POLICIES OF THE GOVERNMENTS WE ARE ASSISTING. I HAVE BEEN DISAPPOINTED AND AT TIMES OUTRAGED BY THESE POLICIES AND WE MUST MAINTAIN OUR RESOLVE THAT THEY BE ALTERED. NEVERTHELESS, I BELIEVE THAT THE STORY OF OUR RELIEF EFFORTS TO DATE, DESPITE ALL THE OBSTACLES, IS LARGELY A STORY OF SUCCESS. LITERALLY MILLIONS HAVE BEEN SAVED FROM DEATH AND DISEASE BECAUSE OF OUR EFFORTS. THE AMERICAN PUBLIC WILL NOT ACCEPT A SITUATION IN WHICH THE AID THEY SO GENEROUSLY HAVE GIVEN DOES NOT REACH THOSE WHO TRULY NEED IT.

TODAY, REPRESENTATIVES FROM CATHOLIC RELIEF SERVICES AND CARE WILL COMMENT ON THE DELIVERY OF VITAL FAMINE RELIEF SUPPLIES AND GIVE US THE BENEFIT OF THEIR EXPERIENCE AND IDEAS AS TO HOW WE SHOULD CONTINUE OUR ASSISTANCE EFFORTS. THESE OUTSTANDING ORGANIZATIONS ARE REPRESENTATIVE OF THE OTHER PRIVATE VOLUNTARY ORGANIZATIONS WHICH ARE WORKING JUST AS HARD IN EMERGENCY RELIEF. WE WILL WELCOME THEIR RECOMMENDATIONS AS TO HOW THE SELECT COMMITTEE CAN FURTHER ASSIST IN THE WORK OF THE WORLD COMMUNITY IN SAVING LIVES.

THIS PAST SPRING, I JOINED OTHER MEMBERS OF THE HUNGER COMMITTEE AS AN ORIGINAL COSPONSOR OF LEGISLATION WHICH PROVIDED LIFE-SAVING EMERGENCY FOOD AID FOR AFRICA THAT WAS DESPERATELY NEEDED TO STEM STARVATION FOR THOUSANDS. IT INCLUDED FUNDING FOR CRITICALLY NEEDED INLAND TRANSPORTATION. I BELIEVE, MR. CHAIRMAN, WE CAN BE PROUD OF THE BIPARTISON EFFORTS OF THE MEMBERS OF THE COMMITTEE, INCLUDING CHAIRMAN LELAND, IN LEADING THE CONGRESS IN THESE LIFE-SAVING EFFORTS.

HOWEVER, AS THE EMERGENCY ASSISTANCE IS PROVIDED, WE MUST NOT LOSE SIGHT OF OUR LONG-TERM DEVELOPMENT GOALS IN THE AFFECTED COUNTRIES. WE MUST TAKE CARE TO PREPARE THE GROUND FOR THE RECIPIENT NATIONS TO BEGIN TO PROVIDE FOR THEIR OWN BASIC NEEDS. THERE IS A POINT AT WHICH EMERGENCY FOOD AID CAN DETER LOCAL FOOD PRODUCTION. WE MUST AVOID THAT COUNTERPRODUCTIVE RESULT. OUR GOAL MUST BE TO MEET CRITICAL EMERGENCY NEEDS WHILE PROMOTING SELF-SUFFICIENCY, NOT DEPENDENCY.

THE UNITED STATES IS BLESSED WITH ABUNDANT RESOURCES, TALENT, AND ENERGY. WHAT BETTER WAY TO EXPRESS OUR THANKFULNESS THAN TO SHARE A PORTION OF OUR ABUNDANCE TO SAVE OTHERS FROM HUNGER AND DISEASE?

IF WE CAN CONSTRUCTIVELY CHANNEL THE AMERICAN PEOPLES' AND OTHER PEOPLES' WILLINGNESS TO HELP AND MAINTAIN OUR NATIONAL EFFORTS THROUGH THE COMING SEVERAL YEARS OF SEVERE STRAIN, I TRULY BELIEVE THAT WE CAN ERADICATE HUNGER. I HOPE THAT TODAY'S WITNESSES WILL SHED SOME LIGHT ON HOW WE CAN DO THIS EVEN BETTER TOMORROW THAN WE ARE DOING TODAY.

PREPARED STATEMENT OF HON. MICKEY LELAND, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF TEXAS

GOOD MORNING. THE AFRICAN FAMINE CRISIS HAS BEEN THE MOST HORRIFYING SYMBOL OF HUNGER AND MALNUTRITION ON THE FACE OF THE EARTH. THE URGENCY OF THE SITUATION IN SOME TWENTY COUNTRIES ACROSS SUB-SAHARAN AFRICA HAS REQUIRED OUR CONSTANT ATTENTION AND CONCERN AND BEST EFFORTS OVER THE PAST YEAR. TODAY, THE SITUATION IS BETTER IN SOME AREAS, BUT CLEARLY WORSE IN THE SUDAN, MOZAMBIQUE AND PARTS OF ETHIOPIA. WE CANNOT AFFORD TO LOWER OUR GUARD OR LESSEN OUR EFFORTS. BASIC MORALITY REQUIRES US TO CONTINUE THE FIGHT FOR AS LONG AS IS REQUIRED.

I DO HOPE, HOWEVER, THAT THE GENEROUS AND EFFECTIVE RESPONSE TO THE NEEDS OF THESE INNOCENT VICTIMS OF DROUGHT, FAMINE, AND CIVIL WAR IN AFRICA BY THE INTERNATIONAL COMMUNITY, THE UNITED STATES GOVERNMENT AND THE AMERICAN PUBLIC REPRESENTS A STRONGER COMMITTMENT TO ERADICATE HUNGER WHEREVER IT MAY BE. THE CHILDREN OF AFRICA ARE ONLY THE MOST VISIBLE VICTIMS OF HUNGER AND STARVATION. THERE ARE SO MANY MORE.

I LOOK FORWARD TO THE TESTIMONY OF OUR WITNESSES AND THE CHANCE TO REVIEW PLANS FOR CONTINUED EFFORTS TO WIN THE STRUGGLE AGAINST THIS FAMINE.

THANK YOU.

PREPARED STATEMENT OF HON. LEON E. PANETTA, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF CALIFORNIA

It is a pleasure to be here this morning to learn about the status of our current emergency relief efforts in Sub-Saharan Africa. Not only is the Select Committee interested in how we can improve the quantity and quality of commodities donated for relief purposes, but we are seeking information about the overall effectiveness of our efforts in meeting the needs of Africa's famine victims.

In the course of the past few months, we have learned that our sizable contribution to the famine relief effort has been hampered by logistical difficulties, undermined by chronic health problems associated with malnutrition and poor sanitary conditions, and stymied by lack of necessary tools necessary for future crop production. The Select Committee is now exploring ways that, through private and public sector cooperation, these obstacles to relief and rehabiliation can be overcome.

Personally, I am convinced that emergency food assistance will be far more effective if it is supplemented by health care treatments, such as Oral Reydration Therapy, vaccinations, and dispensing of Vitamin A. I understand that Mr. Radcliffe may tell us about programs that CARE currently has underway to integrate basic health care services with emergency food assistance.

Other basic services can and should be provided in conjunction with emergency food assistance. These include: improvements in transportation mechanisms necessary for expedient food delivery; promotion of food-for-work projects that enhance productivity; and development of land and water resources to increase future crop yield. Although such efforts would greatly enhance the effectiveness of emergency relief, they cannot be accomplished without the cooperation of host governments, international agencies, and private voluntary organizations. I hope Mr. McPherson, Administrator for AID, can provide us with ideas for accomplishing these goals.

The Select Committee has set an agenda for "Relief Recovery and Rehabiliation" particularly with respect to Sub-Saharan Africa. In recent months, I have worked closely with Congressman Cooper Evans, who serves with me on both the Select Committee and on the House Agriculture Committee, to broaden the availability and range of eligible commodities to be used for foreign food aid under Section 416 authority. Our efforts have been encouraged by Congressman Tony Hall, who has long been a strong leader and innovator in ways to improve food aid programs throughout the world. Congressman Hall's bill, H.R. 2390, provided the blueprint for the 416 amendment adopted by the House Agriculture Committee last week.

While I am encouraged that we are making some progress in the House of Representatives to make more food available to famine victims in Africa and elsewhere, I would like to know what portion of basic dietary needs we are currently providing to developing nations. I understand Charles Hanrahan of the Congressional Research Service has specific data that he will share with us on current world food needs and the constraints that affect actual absorptive capacity in many nations.

Today's hearing will focus not only on the troublesome "food gap" plaguing developing countries, but the many ways that we can improve the health and nutrition of millions of people now threatened by starvation. We on the Select Committee are seeking solutions to the unfortunate crisis in Africa -- solutions that will include implementation of phased-in rehabilitative measures -- solutions that will lead this continent out of a long, painful era of hardship and into an era of progress and development.

I would like to welcome each of our witnesses and look forward to their discussion of these issues. Thank you.

PREPARED STATEMENT OF M. PETER MCPHERSON, ADMINISTRATOR, U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT

The continuing drought in Sub-Saharan Africa has produced a famine of historic proportions. Never have so many African countries seen their people so short of food. Never has Sub-Saharan Africa been so dependent upon imported food. And rarely have so many joined together to come to the aid of so many so severely afflicted.

I am optimistic, having seen early indications of good rainfall in Ethiopia and Sudan, that the fall harvest will be much better this year. Although the rains have come, the crisis is not over.

While the drought was the imemediate cause of this disaster, the situation has been exacerbated by a number of other variables such as fragile infrastructure, poor agricultural policies, warfare, growing populations, and unstable economies.

How did we get to this place in time? What are the African leaders doing about it, and why can't we be 100% effective in our response?

The continent-wide crisis of 1984-85 has been building for several years. In good times--times of sufficient rainfall and agricultural inputs--the harvests of many of these nations barely, or rarely, meet the needs of the people. And, while gross agricultural production increases a little each year, agricultural production per capita continues to decline because population increases are greater than production increases. Clearly, providing enough food in Africa to meet the continent's need is a major problem.

The most recent FAO summary of the cereal supply position for 1984-85 indicates that needs have been met by commercial imports of 2.5 million MT; and food aid pledges amounting to 6.3 million MT--almost half of this from the United States. . Several months remain before the current crop cycle ends. We fully expect that the world's donors will continue to respond through additional pledges and see that these desperate needs are met.

Fortunately, many African governments are becoming both aware and concerned. They recognize the implications for decreased production: that they will become increasingly dependent on external sources, either commercial or through assistance, to make up the deficits.

And African leaders are paying more attention to basic questions of development, of the relationship between population growth rates and agricultural production, forward planning, economic stabilization, and transportation and distribution networks.

The performance of the donor community has been nothing short of extraordinary. Together, we have pledged more than 6.3 million tons of food aid to those countries in need, almost half of which has come from the United States.

Coordination within the donor community continues to improve. UN organizations, especially the World Food Program and the newly established Office of Emergency Operations for Africa (OEOA), have made major contributions in coordinating the massive amount of food aid flowing to Africa. The World Food Program and the participating donors have succeeded in overcoming the daunting problems of getting adequate food aid to the land-locked countries of western Africa, especially Chad.

Several non-governmental organizations, including the International Committee for the Red Cross, Catholic Relief Services, and World Vision Relief Organization, are attempting to respond to the most critical needs of northern Ethiopia by expanding their programs.

Let me turn to a couple of specific countries. Overall, the relief work in the Sahel and Southern Africa is going well. Sudan and Ethiopia are our primary concerns at this time.

As we indicated in our July 10, 1985, fact sheet on the drought, Sudan is stricken with severe economic problems, civil war in the south, and, of course, the worst drought in recent history. An estimated nine million people in that country alone may be affected. We are supplying 80% of Sudan's food imports. The food to feed the Sudanese people now is there, and more is arriving.

We are using the port as the best and largest storage area in the country. Food is getting through in the north, central, and east areas of the country. The biggest problem is inland distribution to the west.

I am optimistic that the combined rail, truck, and air support will continue to stop starvation in the west, also.

The Department of State's Bureau for Refugee Programs has been very successful in working with UNHCR for Ethiopian refugees in eastern Sudan.

In Ethiopia, the U.S. has made a very generous commitment. We are the single largest donor of food to that country, although you would not know it from reading the Ethiopian press.

The private and voluntary community has set up an extraordinarily effective system to oversee the movement of U.S. and other donor commodities and assistance. The UN coordinator in Ethiopia has been especially effective in acting as a bridge of communication between the donor community and the Ethiopian government. Despite our marked political differences, I am pleased to assure you that the United States of America is and will continue to be one of the major donors to Ethiopian famine relief.

Three major areas of concern (which are the least amenable to our control, or the control of the donor community as a whole) are port congestion, in-country distribution, and civil conflict. I want to tell you how we are working on these problems.

Recognizing that massive amounts of food were an absolute necessity, the United States, working with other donors began to estimate needs. As the needs became clearer, food pledges were made and shipments scheduled. The U.S. purposefully moved more quickly than other donors, thus causing a "front loaded" shipping schedule from this country. The necessary delivery schedule caused a great deal of food to arrive in a relatively brief time frame. Each decision has an element of risk attached. In this situation, we developed a conscious strategy to pledge quantities needed to feed hungry people.

This strategy has yielded several results. First, there IS more food on the continent earlier than before to respond to the need of the people. While in-country distribution is less and slower than we had hoped, we have seen no evidence to this point that the predicted mass starvation in the hills and outlying villages of most countries is occurring. We believe that, despite the enormous in-country transportation problems being faced, the critical life-sustaining minimum per capita amount IS getting through. It is making the difference between life and death for the many millions of people who are at risk.

You have all read about the internal distribution problems. Let me assure you that working with the host governments and other donors, forward movement of food is happening. We are supplementing rail, road, bridge, and air links to be sure we avert mass starvation.

This is complicated by civil strife in several countries. We are working with private and voluntary and international organizations to assure hungry people in areas of conflict are not forgotten. Major break-throughs have just been announced in Northern Ethiopia. We have been very successful on the Somalia-Ethiopia border. We are hopeful that new arrangements will be accepted by the feuding parties in Northern Ethiopia and Southern Sudan.

At the same time, we are working with private, voluntary, and non-governmental organizations to build the bridges of recovery and rehabilitation to a future of hope and development.

Using the recently enacted supplemental appropriation for African Famine Relief, a substantial effort is being made to tackle emergency and recovery needs in nonfood areas.

As of June 30, slightly more than $262 million of the $400 million appropriated by the Congress for P.L. 480 Title II and international transportation of P L. 480 Title II commodities had been approved.

Of the $137.5 million Congress made available for non-food emergency uses, AID has notified the Congress of its intent to obligate almost $70 million. Additional notifications will be submitted later. Emergency relief needs are being met first, but over 20% of the funds provided to date are going into recovery and rehabilitation activities.

One-third of the approximately $70 million is going into health and water; two-thirds is for transportation of emergency and relief supplies, including purchase of vehicles, locomotives, spare parts, tires, fuel and other transport support.

The press has not always been balanced in its reporting on this tragedy. A major characteristic of any emergency situation is the public's desire for news coupled with a desire to see results. It is the nature of human beings to expect solutions to follow recognition of problems, and to count as newsworhty primarily those events and circumstances which run counter to our expectations, or which indicate that our expectations may have been compromised. I need not remind you in public life of the propensity of the media to accommodate human nature. I am constantly reminded of the 3,000 MT of corn which spoiled in the port of Mombassa, rather than being queried as to how many lives the remaining 348,000 MT of food shipped to Kenya this past year saved.

Let me assure you, that the United States will

--approve food programs now for shipment later, next year.

In addition, we know that

-- as a percentage of gross shipments, food spoilage in African countries will be quite insignificant.

We will never have a perfect system. But we are coming closer to perfection every year, and we are learning from our successes and our failures.

In summary I would state that, in our experience, the famine in Africa this year is unprecedented. Never before have so many people been so much in need of assistance. The famine has touched the heart of the world. We are working, directly or indirectly, with friendly nations, unfriendly nations, private organizations, international organizations, private citizens, volunteers, rock stars, sports and entertainment figures, and hundreds--indeed millions--across this country and around the world. Never has there been such interest in Africa, nor such an outpouring of help. And a great deal of help is needed.

I will be pleased to respond to your questions.

PREPARED STATEMENT OF CHARLES E. HANRAHAN, SPECIALIST IN AGRICULTURAL POLICY, CONGRESSIONAL RESEARCH SERVICE, LIBRARY OF CONGRESS

AFRICAN FOOD NEEDS

Mr. Chairman and members of the Committee:

I am Charles E. Hanrahan, Specialist in Agricultural Policy, in the Congressional Research Service. I appreciate this opportunity to appear before the Select Committee on Hunger.

At your request and that of the Ranking Minority Member, I have prepared an asssessment of African food needs. My statement has three parts.

In the first, I present information on the current food situation and the outlook for food supplies and food needs in sub-Saharan Africa. My assessment is based on information from the U.S. Department of Agriculture (USDA), the National Oceanographic and Atmospheric Administration (NOAA), the Food and Agriculture Organization of the United Nations (FAO), and the Agency for International Development (AID).

In the second, I look at the way U.S. and international agencies monitor food supply conditions in African countries and make their food needs assessments. Food needs assessement is a critical aspect of the response of donor organizations to food emergencies. Food needs assessments should tell us not only how much food is needed in a recipient country but also when food aid would be counterproductive. Looking at the methods and sources of information on food supply and food needs will give an indication of the state of the art of food needs monitoring and forecasting.

In the last part of my statement, I will outline some considerations as to how the United States can strengthen its capacity to monitor and anticipate food needs in sub-Saharan Africa. Better information about African food supply and demand can improve the U.S. response to food emergencies in African countries. In addition, better information can undergird the food policy reforms that many African countries are making as well as U.S. efforts to assist African countries to increase food availability.

THE CURRENT SITUATION AND OUTLOOK FOR FOOD SUPPLIES IN SUB-SAHARAN AFRICA

The current situation in Africa with respect to food production and food needs presents a mixed picture. In Southern Africa and Kenya, the drought has ended and production has increased dramatically in some countries. There appears to be little likelihood that emergency food aid will be needed during the 1985/86 marketing year in most Southern African countries. In the Sahel countries and in East Africa, the main problem is getting the food already delivered to ports to hungry people. In West and East Africa the rainy season has begun; and although planting conditions have been favorable, it is too soon to predict the 1985 main harvest. Even with improved weather, imporovement in food production in several Sahelian and East African countries will be impeded by shortages of seeds and other critical production inputs and by the fact that farmers are not in place to take advantage of improved weather.

In response to the 1984/85 famine, the international community has allocated unprecedented amounts of food aid to Africa. FAO reports that food aid allocations to 21 drought-affected African countries total nearly 6.8 million metric tons, of which the United States has pledged nearly 3.1 million tons. All the agencies involved in monitoring the food situation in Africa tend to agree that there are unlikely to be any substantial new emergency food needs arising during the remainder of the 1984/85 marketing year. In Sudan, Ethiopia, and a number of Sahelian countries, port congestion and difficulties with internal distribution brought on in part by the onset of the rainy season are impeding getting the food already delivered to people most in need in rural areas. The major challenge facing food aid donors for the remainder of the 1984/85 marketing year is overcoming these port and distribution problems.

Improved rainfall during the 1984/85 growing season has resulted in substantially improved harvests throughout much of Southern Africa. Because of policy reforms that improved incentives to farmers, several countries in this region were well prepared to benefit from the improved weather.

Zimbabwe had heavy rains during its 1984/85 growing season and as a result has achieved record food and agricultural production. Zimbabwe's corn crop, currently estimated at 2.9 million metric tons (2.2 million marketed), will permit the country to rebuild stocks and resume corn exports. With adequate financing, perhaps through international organizations, Zimbabwe could meet some of the food needs of other countries in Southern and East Africa. Over 40 percent of the marketed corn crop will come from traditional farmers in the so-called communal areas. Increased production and marketing from the communal areas is the result of many factors, not just good weather. Government extension services targeted to communal and small-scale farmers, more access to credit, increasing use of fertilizer, improved seeds and other inputs, new farm to market roads into the communal areas, and new buying stations for the Zimbabwe marketing board in rural areas all contributed.

Zambia is currently harvesting a bumper crop of corn because of favorable weather and a larger area planted. Higher producer prices for corn, the centerpiece of Zambian agricultural policy reform, have had the desired short term impact.

Warfare which continues to disrupt food production and distribution in Mozambique and Angola overwhelms most other problems facing these Southern African countries. Mozambique had good rainfall in the 1984/85 growing season but guerilla activity resulted in the displacement of farmers, shortages of fuel and other inputs, and disrupted marketing services. Grain imports into Mozambique, which totaled 640,000 metric tons, 80 percent of which were as food aid, prevented the recurrence of starvation on a mass scale. Similar problems are present in Angola; but because of its better foreign exchange position, food aid is a less critical component of Angola's food imports.

Food aid needs will still be high in Mozambique in 1985/86 despite increased production and stocks. In Angola food imports may also rise because of stagnating food production.

The most serious food supply problems in sub-Saharan Africa continue to be in East Africa where Sudan and Ethiopia are the most seriously affected countries. Sudanese and Ethiopian ports are severely congested because of food aid arrivals. FAO estimated as of mid-June a build-up of 175,000 tons of grain at the ports of Assab and Massawa in Ethiopia, with an additional 37,000 tons at anchor waiting to be off-loaded. Stocks of grain at Port Sudan also at mid-June were estimated to be 250,000 metric tons. The onset of the rains and shortages of trucks, fuel, tires, spareparts and inadequate rail systems constitute a logistical morass impeding internal food distribution.

The prospects for the main season crops (to be harvested during October-December) appear favorable at this time because of good rains in the early part of the planting season. However, seed shortages, shortages of draft animals and other inputs may limit the recovery and reduce food output. If so, food imports and food aid will still be required in 1985/86 but not of the magnitude of 1984/85.

In Kenya, the outlook for grain production is much improved for 1985. Area planted to corn is above average and rains have been abundant and well-distributed throughout the country. The corn harvest (August-November) will allow for a sharp reduction in grain imports. Kenya is likely to be self-sufficient in corn in 1985/86, but will still require imports of wheat, most of which it could import commercially.

Crop prospects are generally good in Tanzania. Grain crops in the southern highlands were excellent and a corn surplus has been reported. Food shortages persist in the northwest region and shortages of trucks and other logistical problems will impede delivery of grain from surplus to deficit areas within the country. Despite improvement, large grain imports will continue in 1985/86 as more supplies are needed to improve consumption levels.

In West Africa, a number of the Sahelian countries are experiencing serious difficulties. The Sahel countries have entered the "lean season," the period leading up to the harvest (which will take place in October-November)--a period when under the best of circumstances rural people are largely dependent on family stocks or local markets and food supplies are quite often in short supply. This year because of the drought, the gap between food consumption and food output has widened; for the eight Sahelian countries as a group, grain production will meet only 67 percent of 1985 consumption requirements of 6.5 million tons. Shortages are most severe in landlocked Chad, Mali, and Niger because of congestion in West and Central African ports and internal logistical constraints. Poor railway and road conditions and limited availability of trucks keep food from being delivered promptly to deficit areas. The rainy season, now underway across the entire Sahelian region, is further complicating food aid delivery.

Crop prospects for the 1985/86 year appear more favorable than last year, but this is a preliminary assessment. Planting conditions have been satisfactory, although the rainy season along the southern edge of the Sahel zone was about two-weeks late. Crops are in the ground and seeds have germinated. Seed shortages which ocurred in Chad, Mali, and Niger may reduce the 1985 harvest. The rainy season is just beginning in Mauritania and in the northern portions of the Sahelian region.

Of the agencies involved in monitoring and assessing African food supply and food needs, only USDA has prepared estimates of 1985/86 food needs. To maintain consumption at recent historical levels, food needs, over and above commercial food imports, in sub-Saharan Africa would amount to 4.2 million tons. This estimate should be considered a first approximation. A more reliable estimate of food needs will be avaialbe from USDA in September when more is known about crop prospects in the Sahel and East Africa.

MONITORING AND ASSESSING FOOD NEEDS

FAO and USDA are the main sources of information about food supply conditions and food needs in the African countries. During the 1984/85 food crisis in Africa, AID has been reporting food needs on a regular basis. These agencies use similar procedures to develop estimates of food need. Grains are the major commodities for which estimates are made, but USDA does take into account the importance of roots and tubers in domestic food supplies in African countries. USDA and FAO first estimate food consumption requirements and then subtract the food available for consumption--the sum of production, commercial imports and stocks. The remaining quantity is food need. FAO and USDA carry out crop condition assessment as well as food needs assessment, but AID has been primarily involved in food needs assessment. Both USDA and FAO use the best available remote sensing technology and satellite imagery to assess crop conditions. Nongovernmental organizations constitute an important source of supplementary information about food supplies and food needs in the African countries.

Inadequate and often unreliable data on Africa's food supply and demand conditions constitute the major obstacle to making good assessments of food supplies and food needs. The African countries do not have anything like the crop reporting and market information services that we in the United States rely on for making estimates of crop supply and demand. As a result, data must be obtained from a wide variety of sources.

FAO bases its estimates of crop production on available information about the area planted and expected yield. FAO's sources of information include monthly reports on crop conditions received by the Global Information and Early Warning System from FAO and World Food Program (WFP) field staff in the African countries. These monthly reports contain information on weather and other factors, such as input availability, that affect yields. FAO also uses satellite imagery, made available under a joint research project with the National Aeronautics and Space Administration (NASA), to analyze vegetative cover during crop growing periods. FAO monitors rainfall using METEOSAT, a satellite of the European Space Agency. Field reports and remote sensing techniques are complemented by joint FAO/WFP food supply assessment missions and by FAO crop condition assessment missions. Production estimates are modified as the cropping season progresses.

In addition to grain production, food stocks and commercial imports are important components of food supply. FAO uses known stocks of the Government and what little information is available about on-farm stocks as part of its estimate. FAO assumes that commercial imports will be at the level of the previous year, but adjusts the figure on the basis of economic and financial information such as prices for export crops and balance of payments position. As information becomes available about actual commercial imports, the estimate is revised.

Consumption needs are estimated generally on the basis of population, per capita grain consumption, and in some cases the actual purchase requirements of grain marketing boards as in Kenya and other East African countries. The difference between grain consumption requirements and grain supplies is the food needed to meet the established consumption level.

USDA also bases its estimates of crop production in African countries on estimates of area planted and expected yields. USDA's sources of information include annual and periodic agricultural situation reports of the agricultural attaches and information compiled by country analysts including national statistical reports, FAO reports, and data contained in trade and other current publications. (Agricultural attache coverage of African countries is limited.) USDA also uses satellite imagery to monitor both vegetative cover and rainfall during the growing season. USDA analysts make periodic visits to African countries to gather information. Production estimates are modified as the growing season progresses.

Like those of FAO, USDA's estimates of stocks are based mainly on known stocks maintained by governments, but USDA's initial estimate of commercial imports is an estimate of the financial capacity of a country to purchase food at commercial prices on world markets. Estimates of stocks and imports are adjusted as more information becomes available.

Consumption requirements are estimates of the food (grains and roots and tubers converted to grain equivalents) required to maintain per capita consumption at recently available levels. The difference between the amount of food needed to maintain per capita consumption at recent historical levels and food supply (production plus imports plus stocks) is the food need. (USDA also makes a nutrition-based estimate of food consumption need based on the assumption that additional food would be needed to close the gap between food supply and an internationally accepted minimum nutritional standard.)

During recent years, AID has also been making estimates of food need. AID's source of information is primarily, if not exclusively, cable reports on food supply conditions and food needs from field staff in AID missions.

In recent months USDA and AID have been cooperating in the preparation of the annual food needs assessment report to Congress required by P.L. 480, as amended. Assembly and maintenance of data will become a joint USDA-AID effort. In particular, AID will make available to USDA analysts information provided in reports by AID field staff in African countries. The food needs assessment report, now published annually by USDA, will be updated on a quarterly basis. The preparation of quarterly food needs estimates should enhance the ability of the United States to respond to food crises in a timely manner and improve the process of making food aid allocation decisions.

AID will participate in USDA's process of interagency review and clearance of food needs assessments. This review and clearance procedure is similar to those USDA already employs, for example, in making estimates of U.S. crop supplies or estimates of annual Soviet grain production. AID's participation in this process along with USDA and other relevant agencies should ensure that interested parties with knowledge and expertise to contribute to the food needs asessment are involved. USDA's review and clearance processes are important. They underlie the integrity of USDA's global agricultural supply and demand monitoring and forecasting system and should result in improved and more regularly available information about African food supply conditions and food needs.

STRENGTHENING FOOD NEEDS ASSESSMENT CAPACITY

The United States Government is in a better position now than previously to monitor and assess African food supply conditions and food needs. Congress may wish to consider options for strengthening that capacity and maintaining it if or when the next African food crisis strikes.

First, USDA and AID can continue to cooperate and coordinate food assessment efforts. USDA country and commodity analysts bring considerable knowledge and judgment to the process of food needs assessment. Because USDA attache coverage of Africa is limited, AID field staff reports can make a unique contribution to needs assessment. USDA staff can provide technical backstopping and training in commodity analysis to AID field staff. Regular reporting by AID field staff even as emergency conditions recede will be invaluable. Quarterly reporting of food supply conditions and food needs should provide an adequate basis for food aid decision making, but special reports may be needed from time to time. The review and clearance process should be flexible enough to permit special reports.

Second, USDA and AID might cooperate more closely with FAO in food needs assessment. FAO's Global information and Early Warning System is the main source of information on food needs for most bilateral food aid donors and WFP. U.S. and FAO food needs assessments should not be in conflict. Both FAO and U.S. needs assessments should be be as accurate and timely as possible since they support the food aid decision-making processes of most donors. The United States and FAO can share information about crop conditions and assesssment methods. They can work together to resolve differences over procedures for estimating food consumption requirements, commercial imports, and stocks. While these differences are primarily technical in nature, they can lead to divergent estimates of food aid need and confusion about the magnitude of the needed response in times of international food crises.

Finally, the capacity of the African countries to collect and analyze data and report on their own food supply conditions and make food needs assessments can be strengthened. With few exceptions, Kenya and Zimbabwe being the most notable, African countries do not have the capacity to develop reliable information on food supplies or food needs. More accurate and reliable data from recipient countries in Africa can lead to improvements in U.S. and FAO estimates and result in an improved response by food aid donors to emergency situations. Such improvements, which will require education and technical and financial assistance, can not only enhance the capability of the international community to deal more effectively with food emergencies, but can also underpin the food policy reforms and development programs needed to increase the availability of food in African countries.

Thank you.

PREPARED STATEMENT OF TIMOTHY J. DONDERO, JR., M.D., INTERNATIONAL HEALTH PROGRAM OFFICE, CENTERS FOR DISEASE CONTROL, PUBLIC HEALTH SERVICE, U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Mr. Chairman and Members of the Select Committee:

I am Timothy J. Dondero, Jr., M.D., a Medical Epidemiologist in the International Health Program Office (IHPO), Centers for Disease Control (CDC), U.S. Public Health Service.

I appreciate the opportunity to discuss with you the emergency health requirements encountered in the current famine and refugee crisis in Africa. My discussion will be based on personal observations of refugee camps in Sudan during March of this year and on the findings of Public Health Service colleagues who have served recently in Africa. Since 1984, 16 Public Health Service personnel have participated in assessments of nutrition and health needs in 7 different drought-affected African nations. These epidemiologic assessments were requested and supported by the Agency for International Development, including its Office of Foreign Disaster Assistance, the Department of State Bureau for Refugee Programs, or the United Nations High Commissioner for Refugees.

Major Health Emergencies

The major health emergencies, that is the chief causes of death or serious disability, appeared depressingly similar in the various countries. They were relatively more frequent in the areas of greatest food deprivation, particularly in refugee and other displaced populations. The most seriously affected group was the young children. In three new refugee camps in Sudan which I visited, over half of all deaths during the first 6 weeks of camp operation were in children under 5 years old (465 of 916). The actual risk of dying (death rate) for children under 5 was over four and one half times as high as for older children or adults.

Initially, the major killer among the refugees and displaced persons has been malnutrition. Protein-energy malnutrition (less than 80% of the reference median weight-for-height) affected 25 to 52% of refugee children in Sudan in the period from January to March of this year. Malnutrition rates from 8 to 67% were found among displaced populations in Chad, while rates ranged from 8 to 18% in other surveyed areas in the Sahel.

The terminal episode in malnutrition is usually an infectious disease, but the fundamental cause of death is acute malnutrition. Those who are severely malnourished (less than 70% of the reference median weight-for-height or otherwise clinically diagnosed) are at highest risk of dying. In one refugee camp I visited in March, nearly one quarter of the children (93 out of 408) classified as severely malnourished had died in the previous 2 months.

Though less clearly life threatening, Vitamin A deficiency has been extremely important in Sudan and probably in Ethiopia. Surveys among newly arriving Ethiopian refugees in Sudan found from 2 to 7% of the children to have clinical Vitamin A deficiency. If untreated, this condition leads to permanent blindness. An insidious aspect of this deficiency for refugees is that blindness can be provoked by an infection, such as measles, which is more likely to be acquired under crowded camp conditions. Even more disturbing, blindness can be brought on by feeding the Vitamin A deficient individual a diet not containing that vitamin, since the increased metabolism resulting from the feeding causes the body's demand for the vitamin to increase rapidly.

Aside from malnutrition, two other risk factors have been extremely important in the displaced populations: crowding and poor sanitation. Both foster the rapid spread of infectious diseases, which more seriously affect malnourished individuals.

The infectious diseases causing death were best identified in refugees in Sudan, but these illnesses have probably had similar relative importance in the other drought-affected populations. Indeed, they are the same few groups of diseases that cause the majority of deaths in developing countries in the absence of drought, although these diseases have been more frequent under famine and refugee conditions.

Diarrheal disease appears to be the major infectious disease killer, particularly of children. Watery diarrhea, of various infectious causes, has been the most common. In addition, in Sudan, bloody dysentery has also been important, perhaps more so than in some of the other countries. Diarrheal disease is both more prolonged and more severe in malnourished individuals and leads to death more rapidly.

In several countries in the Horn of Africa, as well as in West African Sahel, cholera has been an important killer. Cholera, despite its fearsome name, is a watery type of diarrhea, and responds to the same management with oral fluids as do other watery diarrheas.

A very serious preventable killer in December and January was measles, a well-recognized, high-risk disease in malnourished persons. Precise figures are not available, but estimates by reasonable observers suggest as many as 40 percent of refugee children who contracted the disease in the border camps in Sudan died. In addition to the acute complications of the disease, measles often precipitates a vicious cycle of prolonged diarrhea and increased malnutrition. Even under non-famine conditions, measles is a serious disease in Africa, killing from 2 to 8 percent or more of infected children.

Respiratory disease, particularly pneumonia and probably whooping cough, has been another important cause of death in refugees in Sudan, as it is in malnourished persons (and even in better nourished children) in other developing countries.

Malaria appeared to be less of a problem in the drought-affected populations than in other parts of Africa, at least before the rains began. I do not have information on this disease from the last 2 months. Presumably, the risk has increased in those areas where the rains have come and mosquito populations have increased. Where refugees have come from nonmalarious areas, such as the highlands of Ethiopia, to malaria endemic areas, the risk of severe, even fatal, infection is increased.

There are several other noteworthy diseases which have had either a more localized or a quantitatively smaller impact but which have caused special concerns and management problems. Among these has been meningitis in Sudan, which was controlled very promptly by an effective vaccination campaign organized by the Sudanese authorities. Typhus and relapsing fever have been significant problems in camps in Ethiopia. Several specific vitamin deficiency diseases, other than Vitamin A deficiency, have also appeared.

Scurvy (Vitamin C deficiency) in particular has been a problem in some areas. Tuberculosis has been a nagging management problem in many camps because of its lengthy treatment regimen. Fewer cases of tuberculosis are involved than are other life threatening diseases, and the clinical requirements of managing individual cases makes tuberculosis treatment a lower priority in the emergency phase of famine and refugee relief.

These various diseases were the major causes of death or serious disability, listed in the order of estimated importance, at least for Sudan. Most of the conditions are preventable or treatable. In the current emergency, several of the conditions with the most serious impact may not at the beginning have received the priority which in retrospect they deserved from the international relief community. Several lessons can be learned.

Emergency Health Requirements

The first and foremost health requirement during the emergency phase of the famine and refugee crisis is food: appropriate food in adequate quantities, equitably delivered in a timely manner. Doctors, nurses, medicines and hospitals are distinctly not the first priority for a starving population. Food is the specific "drug" against malnutrition.

There are three components of the food response to severe malnutrition: the general ration, supplementary feeding, and therapeutic feeding.

The basic emergency relief intervention is the general food ration of at least 1,800 calories per person per day for maintenance, more than that for recovery. Beyond mere calories, the ration must contain adequate proportions of fats and protein. The basic ration will help sustain those who are not already severely malnourished.

Supplementary feeding (additional high-energy prepared food provided directly to the individual at a feeding station) is required for those already somewhat malnourished to prevent them from becoming more severely malnourished. Intensive therapeutic feeding (a full balanced diet of prepared high-energy food fed to the individual throughout the day at a feeding station) is required for those who are severely malnourished. Both of these special feeding programs require the allocation of considerable resources, an experienced nutritionist, and a significant level of organization and coordination. But they are lifesaving measures and must be considered among the top relief priorities for malnourished populations. The need for these feeding services can be anticipated in advance if there is some idea of the prevailing level of malnutrition.

For reasons discussed previously, measles prevention through immunization is an absolute top priority for children in malnourished populations, especially for those in refugee camps or displaced person settlements. Immunization of all previously unvaccinated children 9 months to 59 months of age (or sometimes older, depending on the local epidemiologic conditions) is critical, and should be done as soon as possible after arrival at a camp, in order to avoid the type of measles epidemic experienced by the new refugees in Sudan this year. In addition to the actual immunization, a record of the procedure must be provided to the individual to facilitate follow-up immunization programs. The need for measles vaccine, vaccination equipment, cold chain (appropriate storage and transport equipment for vaccine), and the necessary logistical support must be anticipated in relief efforts.

Another of the top priorities in the current refugee and displaced person emergency, at least in eastern Africa, has been Vitamin A prophylaxis on nearly a population-wide basis. Convenient to use, Vitamin A capsules of 200,000 IU should be given to all children on admission to a camp and subsequently distributed every 6 months in order to prevent blindness from Vitamin A deficiency. (Actual clinical cases detected during screening need larger, therapeutic doses.) If symptoms of Vitamin A deficiency are known to exist in even as few as 2% of the population of the drought-affected area, the need for Vitamin A, and a system for its mass distribution, must be anticipated.

The other major emergency health requirement which is essential in virtually all drought and refugee emergencies, is control of deaths due to diarrheal disease through oral rehydration therapy (ORT). This simple treatment is the principal diarrheal disease control measure and is aimed at preventing dehydration and death caused by diarrhea rather than the diarrhea itself. Supplies of prepackaged Oral Rehydration Salts (ORS) are required, as is a system for ORT implementation. The need for an ORT program can be anticipated and supplies of ORS can be pre-positioned.

In addition to the four most basic emergency health requirements, food plus feeding programs, measles immunization, Vitamin A prophylaxis, and oral rehydration therapy, there are three other essential provisions for refugees and displaced persons: water of adequate quantity and quality, shelter, and sanitation. To assure the best application of these various requirements, two management factors are essential: first, early rapid nutritional and health needs assessment and, second, commitment by the "hands on" relief agencies of sufficient human resources to assure the emergency preventive and control services. In addition, all relief activities must conform to, or at least not conflict with, national policy.

Early rapid assessment by experienced public health professionals is necessary to determine the size and composition of the population at risk, to identify special high risk subgroups, and to determine the level of malnutrition, the major local health risks, the water and sanitation needs, and the types of health activities most required. This information is essential for setting priorities, for assuring that the most critical needs are addressed first, for estimating the quantities of food, supplies, and services required, and for reducing the amount of inappropriate relief activities. In short, the rapid assessment, followed by continued monitoring, is needed to improve management of the relief efforts.

In drought-affected areas without refugee or displaced person camps and where the level of famine impact is unknown, early rapid assessment of the nutritional status and the health needs of the population is critical to estimating the degree of current and impending problems and to instituting timely and appropriate interventions.

The other requirement is the commitment by the "hands on" relief agencies of a sufficient proportion of their health resources to the major lifesaving preventive and control activities. There has been a tendency to respond to the refugee and displaced person emergencies with clinical services, doctors and nurses, field hospitals, outpatient clinics, medicines and so forth, at the expense of the more vitally needed and more effective preventive and control activities.

In two of the refugee camps I visited, which at the time were still seriously understaffed, and in which malnutrition was at about the 30 percent level, approximately two thirds of the expatriate health professionals worked in either hospital or outpatient care. Yet after two months of camp operations, 74 percent of all deaths still occurred outside the hospital. Meanwhile the supplementary and therapeutic feeding services had insufficient facilities. The camps had over 1,500 malnourished children each, but had only one feeding specialist per camp. Only about half of the registered, severely malnourished children, the group at highest risk of death, participated in the feeding program. At the same camps, the public health services were also relatively understaffed, but were responsible for immunizations, disease and death surveillance, communicable disease control activities, home visits and follow-up, bringing defaulters back for therapeutic feeding, etc. These camps were not unique. In fact, they were rather typical in terms of the excessive emphasis on clinical, curative medicine.

Summary

Many of the conditions have no doubt already improved in those areas where international relief efforts are under way. The comments made here are based on observations by my colleagues and myself during the emergency phase of the famine and refugee crises, and perhaps should better be considered lessons learned which are more applicable to newly emerging situations than to those relief efforts already in progress. In summary, the highest priority emergency health requirements identified during the current crisis have been, in my opinion, the provision of food and supplementary and therapeutic feeding, measles immunization, Vitamin A prophylaxis, and oral rehydration therapy, plus the two management issues, rapid needs assessment with continued monitoring, and adequate allocation of resources to prevention and control activities.

One final note -- from discussions with colleagues who were involved in the 1973-74 drought and famine in Africa, this crisis appears to be a repeat. A comprehensive, long-term approach would be beneficial so that these emergency responses are no longer necessary.

This concludes my formal statement, Mr. Chairman. I would be happy to answer any questions you or members of the Committee may have.

PREPARED STATEMENT OF GEORGE RADCLIFFE, ASSISTANT EXECUTIVE DIRECTOR, CARE

Background

Africa's land size and dispersed populations create special transport needs and problems. Fourteen of the world's twenty landlocked developing countries are located in Africa; almost one-third of all sub-Saharan countries are landlocked, often hundreds of kilometers from the sea (see attached map). Basic infrastructure is, in some areas, almost non-existent: roads, railroads, ports, storage facilities and communications systems are scant and often do not penetrate the hinterland.

Geographic factors continue to impose special hardship on transport development. The existence of long routes means that road maintenance is particularly demanding and expensive. And in Africa's landlocked nations, road and transport maintenance are particularly costly. Rains, when adequate, leave roads impassable for lengthy periods of time and bring transport to a standstill.

The fact that, throughout Sahelian Africa, marginal lands have been used much more intensively than a generation ago intensifies the effects of irregular rainfall. There are indications that in some areas the natural ground cover has been degraded through overgrazing, and that the expansion of cleared areas has negatively influenced evaporation and rainfall. On the one hand, this has led to desert encroachment. On the other, when rains do come, they have led to more frequent and severe road damage.

Chad as Example

By way of example, I would like to share with the Committee some of the special logistical problems we faced in Chad where, for two years, I served as CARE Country Director.

The remoteness of Chad's urban centers from ocean ports(1,700-3,000 Kms) results in high transport costs which, in turn, inflate prices of imports and consumer goods. The transport portals and corridors for Chad are:

1) The Nigeria route via Maiduguri to Lagos and the port of Appapa.
2) The Cameroon route via Ngaoundere to Douala (the principal relief corridor).
3) The trans-Equatorial route via Bangui and Brazzaville to Pointe Noire.

The principal relief corridor, through the Cameroons, is approximately 1,750 kilometers, 950 by rail (Douala to Ngaoundere) and 800 by road (Ngaoundere-N'djamena). The average transit time was 2-4 weeks if priority is given to goods destined for Chad. Current reports are that the Cameroon authorities have done an excellent job in insuring high priority to Chadian famine relief shipments. The final transport link before reaching the Chadian capital of N'djamena is a small ferry across the Chari River. Once relief supplies arrived in N'djamena, we were faced with limited food storage capacity (about 23,000 metric tons).

Roads are the primary mode of transport in Chad accounting for about 85% of total freight traffic. All-weather road construction began in 1964 with an east-west trunk road from Sarh to Papa, followed by the paving of N'djamena's road links with Guelendeng and Massoquet. In 1977, the Chad road network covered 7,269 kms; 253 kms. paved and approximately 1,050 kms. all-weather, engineered, gravel roads. This network is supplemented by 24,000 miles of unmaintained tracks, most of which are passable only 9 months of the year. The major portion of the total road network is located in the southern cotton zone which covers 10% of the country while the sparsely populated north is served by desert track.

Given the background, let me list some of the specific logistical-related problems we faced in Chad:

1) Although the road network is concentrated in the southern part of the country, food shortages are most severe in the north.
2) Irregular movement of food commodities through the lengthy pipeline.
3) Frequent breakdowns in communications systems.
4) Lengthy delays at the Chari River crossing.
5) Insufficient rail cars in Douala to meet demand; frequent rail breakdowns between Douala and Ngaoundere.
6) Insufficient land transport, particularly during cotton season.
7) Fuel shortages.
8) Lack of adequate facilities to repair vehicles.
9) Shortage of spare parts.
10) Lengthy inland turnaround time.
11) Political misunderstandings leading to border closings.
12) Frequently changing security conditions within Chad.

Logistical Challenges in Other African Countries:

With respect to the logistical challenges we now face in Mozambique, Somalia, Ethiopia, and the Sudan, let me give an abbreviated sampling of some of the problems:

1) Scheduling of shipments: There is tremendous scope for improved shipping schedule coordination between donor and recipient countries and the international and private voluntary organizations which share responsibility for program management. The donor scheduling of relief supply shipments often ignores critical factors such as port discharge rates, seasonal constraints, competition for berths with commercial shipments, etc.
2) Choice of Ships: In selecting the type of ship for delivery of food and relief supplies to Africa, careful scrutiny should be given to cargo capacity, berthing limitations at the port of discharge, use of lighters of discharge, and self-contained discharge capacity.
3) Lack of adequate mechanical discharge equipment at the receiving ports (conveyors, cranes, and fork lifts).
4) Lack of adequate transit warehousing at the receiving ports.
5) Lack of adequate inland buffer grain storage capacity to relieve port congestion.
6) Civil disturbance precluding delivery of relief supplies to certain regions.
7) The need for stronger linkage between early warning systems and the response time.
8) The use of leased or rented trucks for inland transportation versus the purchase, management, and maintenance of an independent fleet of vehicles.

By way of example and for a comprehensive review of logistical problems in the Horn of Africa, we have available to members the 1982 Annual Report of the Emergency Logistics Unit of the Somali National Refugee Commission which is managed under contract by CARE with the UNHCR and the Somali Government.

Summary

The paucity of logistical infrastructure represents a serious impediment to development, particularly the intra-continental economic linkages and integration. The critical role of transport and communications at Africa's present stage of development was recognized by the African Governments in March 1977, when the Council of Ministers of the U.N. Economic Commission for Africa (ECA) declared 1978-88 a Transportation and Communications Decade in Africa, with strong support by the Organization of African Unity (OAU) in the Lagos Plan of Action.

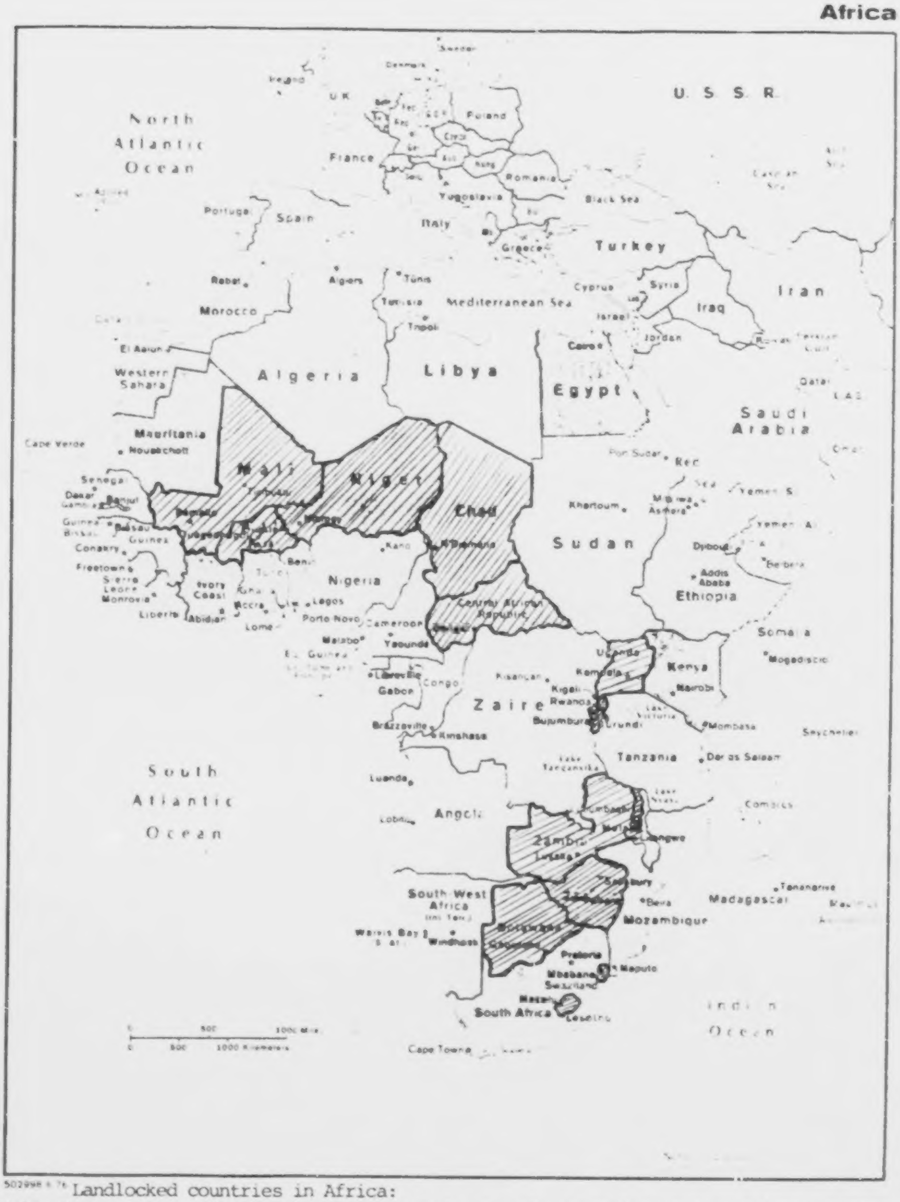
The famine in sub-Saharan and Southern Africa has severely taxed the regions' already scarce and fragile logistical infrastructure. Additionally, trucks, locomotives, railwagons, coastal ships, river barges, bridges, fuel, lubricants, and spare parts all require heavy foreign exchange outlays. With the famine-affected countries already faced with serious debt-servicing problems, their capacities to acquire the most fundamental requirements of a modern logistical system are limited, if not non-existent. The donor community has been at times slow to recognize the concurrent need for logistical support combined food aid. In a recent Africa Famine Update, the Christian Science Monitor's David K. Willis tersely expressed these needs in the following quote:

> "Immediate need - Trucks, trucks, and more trucks, fuel, tires, spare parts, locomotives, boxcars, to get more food from ports to people before seasonal rains cut roads and railroads."

Mr. Chairman, we would like to commend you and the other members of this Committee who supported a provision to include inland transportation costs along with the U.S. contribution of food aid in the Africa Supplemental. This provision has enabled our organizations to expedite the delivery of food aid from port to areas of need.

Recognizing the special transport and logistical problems faced by all the famine affected countries of Africa, it is our belief that short term relief and medium term rehabilitation measures can be linked to maintaining, improving, and expanding logistical infrastructure. For example, during the recent period of food shortages in Ghana, food aid was made available, through World Food Program and World Bank cooperation, to employees of Ghana Railways and the Ghana Highway Authority. This project both reduced absenteeism and increased work output. In Bangladesh, rural roads are annually repaired through a PL 480, Title II Food-for-Work scheme managed by CARE and the Bangladesh Government. The same roads are maintained year round by destitute rural women who earn a weekly wage from funds generated by the sale of Canadian food aid.

By linking such labor intensive food aid projects and large scale road construction schemes using capital equipment, with strong training and maintenance components, we can simultaneously mitigate the worst effects of the famine and contribute to Africa's long term need for transport infrastructure.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U. S. S. R.
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Landlocked countries in Africa:
Mali, Niger, Chad, CAR, Burkina Faso, Uganda, Rwanda, Burundi; Zambia, Malawi, Zimbabwe, Botswana, Swaziland, Lesotho.

PREPARED STATEMENT OF WILLIAM E. SCHAUFELE, CATHOLIC RELIEF SERVICES

As much as I am pleased to appear before your committee, Mr. Chairman, I do not want to mislead you. I am not a development expert and I must leave it to others to discuss the more technical aspects of the subject of your deliberations.

Rather, any expertise I offer emerges from my experience as a Foreign Service Officer. Over my 30 year career I spent approximately 17 in African affairs, in Africa and in Washington, including assignments as an Ambassador in Africa and as Assistant Secretary of State for African Affairs.

Famine, hunger, and drought are not new in Africa. However, modern communications almost instantly make us more aware of them and growing global interdependence provides incentives, resources and, often, the will to meet the challenge and opportunity which such disasters offer us. The immediate need and the humanitarian impulse of the world conscience do galvanize us to swing into action to feed those so adversely affected. Certainly, despite what we have learned from past experience in the organization and implementation of famine and hunger relief operations, there is still no automatic and effortless way to assure the most efficient and effective shipment, storage and distribution of food stocks. In effect, organizational, material, political and other considerations affect the efficacy of the delivery systems.

We hope - the rains and other factors willing - that the massive relief effort centering in the worst-affected areas of Ethiopia and Sudan, but stretching across the continent to the west as well as some areas farther south, will prove adequate to prevent a calamity of a magnitude beyond that which has already occurred.

Catholic Relief Services - without curtailing, and even while expanding its relief efforts - is increasingly turning its attention to rehabilitation and, in the long run, development projects, mostly related to agricultural development and production. We are all grateful that our help has been part of an effective international effort to save the lives of many human beings who might have otherwise perished or had their life spans seriously shortened. But we must all look beyond the immediate situation so that these people can once more become independent and productive members of society.

Simply to expect them to return to their home areas and resume their economic and other activities as before is neither practical nor humane. We already know, for instance, that stocks of seed grain are seriouly depleted because hungry people have had to consume them in the face of starvation. The procurement of seed, especially that most suitable for the conditions of the region in which it is to be planted, has proved difficult and costly. Supplies of agricultural implements will have to be augmented to enable the farmers to better work their fields. Adequate spplies of water are necessary. It will be necessary to continue to monitor and treat the deleterious affects of malnutrition. At the same time, adequate supplies of food will still be necessary at least until the harvests are in.

One calamitous effect of the drought will be harder to address in the short run - the decimation of the work animal population which was seriously reduced by emergency consumption or died for lack of feed and water. Unfortunately, the speedy replacement of such animals with those able to flourish in the conditions of the area is impossible. Already, in the affected areas of Ethiopia, the price for the few animals available has increased tenfold or more. To the extent that this situation impedes food production, a continuing international food program will be needed, probably for a period of years.

Private voluntary organizations, foreign governments, and international organizations, can operate programs in the affected areas only with the cooperation of the host governments which may have additional considerations dictated by national political, economic and social perceptions not always readily appreciated or understood by international donors. Yet, the taxpayers of donor countries and the generous individual and organizational donors to private groups understandably become impatient, even disillusioned, if they see such considerations hindering the effectiveness of relief and rehabilitation programs.

Only governments and large international institutions can furnish the overwhelming preponderance of the resources necessary to meet and resolve a problem as massive as the present crisis. While Catholic Relief Services has earmarked $30 million of its own funds for Ethiopian rehabilitation programs in the fields of agriculture, water and sanitation, health and medicines, and the necessary logistic organization and administration to implement these programs, that sum is small compared to the need. When one realizes that it costs $ 156.00 just to get one ton of grain from an Ethiopian port to those who are starving, and the 1985 shortfall in Ethiopia alone is estimated at almost two million metric tons, we gain a better idea of the magnitude of the problem.

In its own way, Catholic Relief Services is looking further down the road--beyond the usual relief and rehabilitation activities it has traditionally carried out. We have established a special working group which is exploring future development possibilities with the aim of achieving two objectives.

First, we are holding frequent meetings and conducting a continuous dialogue with other private voluntary organizations - African American and European - to establish the basis for effective future cooperation in Africa. We see this not only as a way to eliminate waste and duplication, but more important, to pool and coordinate our talents and resources when appropriate to accomplish lasting progress. Encouraged by our discussions, I would stress that participating PVOs will retain their own identities and their own programs. What we seek is cooperation, coordination, even co-financing, on projects and programs which lend themselves to such an approach.

The second track, linked to the first, consists of intensive consultations with other PVOs, universities, and other groups and specialists to develop a longer range development strategy than has been the case in the past. It, too, is designed to promote effective African development, firmly based on what is acceptable in African terms, and relying on full partnership with African institutions, upon which true progress ultimately depends.

As proof of our own commitment, and working from the results of our studies, CRS has itself earmarked $20 million of its own funds for the realization of these objectives.

PVOs like Catholic Relief Services also use U.S. Government resources in their programs, because there are some activities more appropriate to private endeavor than for the government.

We welcome and strongly believe in this partnership which reflects the intent of Congress and the kind of government/private cooperation so highly valued by many Americans. We hope, in pursuit of our common aims, that we can count on the reinforcement of this cooperation, which depends in large part on the commitment, predictability and consistency of government programs and financing.

We were gratified to see that in the Foreign Assistance Authorization Bill the House has provided "such sums as may be needed" for replenishment to the International Fund for Agricultural Development. This was followed last week by the House Foreign Operations Subcommittee mark-up which earmarked $50 million for the 1986 U.S. contribution to IFAD as well as for the IFAD special Africa fund. Especially now, with Africa facing the worst faminie in a century, the emphasis which IFAD places on helping the small farmer is a much needed multilateral program thrust. IFAD's past record and its history of cost-effective operations make that organization an important element in both medium and long term development efforts in Africa and elsewhere in the Third World. We hope that the actions already taken will lead to final approval by the Congress of support for IFAD in 1986 and beyond.

No one realizes better than I that development is not an exact science. We are dealing with people and the complexity of human relationships and of how societies operate, especially societies of which we still understand too little, do not make our task any easier.

The explosion of sympathy, even horror, over the human suffering in Africa has indeed resulted in an outpouring of material and financial assistance. But the immediate relief which that aid helps finance is, in terms of human and material resources, only a minor part of what will eventually be needed if we are to make even a dent in the basic causes of such disasters. If this committee, in its hearings and publications can dramatize the realization that the fight has only begun maybe that flow of assistance can be maintained and even expanded.

Prepared Statement of Peter J. Davies, President and Chief Executive Officer, INTERACTION, American Council for Voluntary International Action

LONG-TERM DEVELOPMENT IN AFRICA: RECOMMITMENT TO A PARTNERSHIP

The Select Committee on Hunger is to be congratulated for holding these hearings and for all it is doing to focus attention on the African crisis and need for long-term solutions.

INTERACTION is a broadly-based association of over 100 U.S. private and voluntary organizations (PVOs) working in international devleopment, relief and reconstruction, migration and refugee assistance, public policy and education on Third World development issues. As you know, PVOs are an expression of the concerns of the American people for people in need overseas. INTERACTION members are reassessing what they need to do individually and collectively, in partnership with African governments and the African people, to address this crisis and to seek longer-term solutions. These PVOs met in June, 1985 to explore together where we PVOs should be going at this crucial juncture. INTERACTION members have formed a committee to continue this search for solutions.

We commend the Select Committee for its efforts and look forward to working with you to realize our mutual objectives of helping Africa to overcome hunger and to become self-reliant.

We would like to share with you some observations on the role and commitment of PVOs in Africa today.

INTRODUCTION:

The greatest human crisis of our time is taking place in Africa. We, the private voluntary agencies working in international development, see it on a daily basis as we work to help save lives. We see death and despair, but we also see hope for Africa--hope to move from famine, to recovery, to development, to a better life.

Given the gravity of the current situation, it is an important time for those who have made a commitment to Africa to undertake a re-examination of that commitment. PVOs must ask what our past efforts in Africa have meant in light of the human costs being exacted today. Regarding the emergency, PVOs must examine whether more could have been done to alert people to the crisis and whether local counterpart agencies were adequately prepared to deal with it.

PVOs have a unique perspective on the development process acquired through many years of work at the grassroots level. We must not be afraid to undertake a critical self-examination of

PVO principles and commitments to determine our successes and failures and to correct our course, if necessary. Further, the PVO experience must be documented and shared with others.

We are gratified by the generosity and concern of private citizens around the world during the African emergency. PVOs must demonstrate to them and ourselves that their money will be well spent. Further, private citizens, governments and international donor agencies need to work together to move beyond the crisis and make a long term commitment to African development.

I. Implementation: The Process of Development

Much of the PVOs unique approach to development lies in our emphasis on the process of development. We have committed ourselves to certain principles: reaching the poor, participation, flexibility and experimentation, people-to-people projects, strengthening local institutions and small-scale, cost-effective projects. This is where PVOs have the most to offer and where the reassessment should begin.

PVOs traditionally act more as catalyzers, and motivators rather than transferrers of money or other resources. PVOs emphasize training, participation, partnership with local groups, apply a long term approach and above all should be committed to learn from mistakes and not believe that we have all the answers.

A. A Recommitment to PVO Principles

1). Development is an evolving journey, the aspects and dynamics of which are defined by the local situation. Every community and country is different and approaches must be constantly evaluated and revised to ensure that they meet the needs of the changing local situation.

2). Participatory processess are an essential ingredient of sustainable development. Local participation in all aspects of the process from the beginning is of primary importance. Thus, a key role for catalyzers of development is to enhance individual decision-making capacities and the viability of community structures and institutions to carry out the local management function so that true ownership and responsibility are engendered. This has long been a tenet of PVO development activities, but we must periodically assess whether or not we have been effective in facilitating local participation.

3). Partnership, not dependency, defines the appropriate relationship between PVOs and local communities. The aim of development is to allow the individual, the family, and the local community to have options to meet their basic human needs and to move toward a higher quality of life. External support for local development is the role of the catalyzer or facilitator. PVOs can establish the creative linkages between local human resources, governmental institutions, commercial industrial resources, and private international development efforts. We must shift from initiating development projects to responding to Africans' requests for assistance in partnership with local communities. Our participation should end when the community is able to deal with its own problems.

4). Development is long term. It is essential to shift away from 1-2 year approaches and towards commitments of 5-10 years or longer. Long term commitments are important in all phases of development: planning, implementation, funding, and evaluation.

5). Professionalism, in development work necessitates accountability on many levels. Project planning must be based on sound economic, social, environmental, and technical criteria. PVOs must maintain a commitment to ongoing evaluation, and be willing to acknowledge and correct mistakes. In addition, we must be financially accountable.

B. Initiatives: New and Old

1. Promotion and Support of Indigenous PVOs

The development of indigenous PVOs is the key to working ourselves out of a job. True development will occur when Africans develop and implement their own projects within their own institutions. Institutional development, including training indigenous personnel in program planning and management is an essential element. Counterpart arrangements where expatriates and Africans work side by side are an important part of the transition to local control of projects. PVOs need to do everything possible to help strengthen these local institutions.

2. Encouragement and Support of Private Voluntary Organization Councils

The number of PVO/NGOs working in Africa has increased significantly in recent years. At the same time, African PVOs have emerged. The large numbers of PVO/NGOs often makes it difficult for African governments and other international donors to relate to them. Greater effectiveness and efficiency in field operations could be achieved through better coordination between PVOs. One way of achieving such coordination is to encourage and expand local PVO councils.

3. Coordination with Donors and Groups in Country

Regional and international agencies including the United Nations, (UNDP, FAO, UNEP, WHO, & UNHCR) the World Food Council, the Consultative Group on International Agriculture Research (CGIAR), the Organization of Africa Unity and the International Council of Voluntary Agencies should be called on for dialogue, cooperation and assistance.

PVOs could also benefit from more cooperation and coordination with national organizations, government agencies, foundations, universities, research institutions, private sector institutions and professional societies both in Africa and the United States. Coordination might include cooperative planning, sharing knowledge, to avoid duplication of effort, personnel and resources, and joint projects.

4. Development of Sound Projects and Programs

Sufficient experience has been gained in Africa over the past quarter century to identify the prime elements of effective development programs. Projects should:

1. Be manageable in terms of size, scope and administrative complexity.
2. Involve the beneficiaries in their conception, planning and implementation.
3. Focus on objectives which are sustainable beyond the period of external assistance.
4. Emphasize training, transfer of new skills and technology.

5. Fit integrally into national and local development.

6. Make maximum use of indigenous resources and expertise, and employ expatriates only where absolutely necessary.

7. Strengthen local development organizations.

8. Involve all relevant actors (central ministries, local authorities, the private sector, community groups and churches).

9. Provide for collection of adequate baseline data at the very beginning of a program or project to allow effective evaluation and assimilation of new experience.

5. Policy Reform

Working at the grassroots, PVOs may be in a position to observe and document the effects of central government policies on the poor in such sectors as agriculture, health and energy. PVOs should use their knowledge and experience to speak to African governments on behalf of the communities with which they work.

II. Transition to Development: Relief, Recovery & Refugees

Right now nothing is more important for the concerned world community, than to save the lives of those affected by the current drought affecting 19 or more countries across Africa. In addition to food, funds for adequate transportation, and the full cooperation of public authorities are needed to ensure that food reaches the people and people have access to food.

But our sights must also shift to helping the starving restart their lives. Given the political and climatic situations in many areas, the motivation of people to remain in their villages, and to move back from the camps to their farms, is amazingly strong. People who have sold or depleted their resources, including farm animals and seeds, cannot begin to support themselves without some help. The primary task is to get people back into their communities where they can start productive lives again. Agricultural inputs, water and sanitation facilities, health and medical services, and income generating opportunities all have a central place in the short-term recovery of Africa.

Specially designed development programs are needed for refugees so as to enhance, rather than rob from, development programs designed for the local inhabitants. Countries of asylum generally provide refugees with emergency needs, but can do little to move beyond "care and maintenance". There may be severe disruption of patterns of authority and social support among refugee population. Therefore, additional resources and specifically designed strategies are needed so as to incorporate refugees and returnees into the development process to the greatest extent possible.

III. Priority Sectors

While the sectors are independently identified in the following paragraphs, this does not imply that they are to be treated independently. Agriculture, health, nutrition, population, education and small industry are inherently interrelated and need to be addressed in an integrated strategy. Education and training are fundamental to development at all levels in every sector. There needs to be greater recognition of the role of women in all sectors.

A. AGRICULTURE

The current drought and the resulting famine underscore the need to redouble efforts in the agricultural sector. The rural farm family will continue to be the backbone of the African economy and should be given a high priority in development programs. More appropriate research, focusing on low-cost inputs for small farmers and drought-resistant crops, more effective extension services, increased access to credit and more appropriate pricing policies would encourage thousands of small farmers to produce and market more food. Women farmers, producing from 50 to 80% of food and other crops and playing the major role in food processing and preparation have not received the benefits of agricultural programs.

Working at the grassroots level, PVOs are in a position to encourage small farmers to adopt low-cost, environmentally-sound agricultural practices. PVOs should coordinate with AID's small farmer program, the International Fund for Agricultural Development and the Peace Corps.

Given its current state of agricultural production, Africa will most likely continue to need food aid for the forseeable future. PVOs implementing PL480 programs should recommit themselves to using non-emergency food aid to promote long term development in carefully monitored programs.

B. HEALTH & NUTRITION

In the years since independence, nearly a decade has added to the life expectancies of Africans. Governments are to be commended for their campaigns to eradicate measles, smallpox and malaria; hygiene, nutrition, and primary health care programs have also been greatly expanded. Unfortunately, many of these hard fought gains are now being threatened. Malnutrition and starvation, by-products of the current famine, have lead to increased susceptibility to disease.

Primary health care systems which include networks of community health workers, small clinics, maternal-child health (including family planning), and water and sanitation programs are the foundation of health care in Africa.

PVOs have a long history of involvement in the health sector, often centered on operating hospitals and clinics. However, we have begun to make the transition to decentralized community health systems. We have been quick to incorporate UNICEF's "GOBI" program of growth charts, oral rehydration salts, breastfeeding and immunization into our programs. PL480 maternal-child health, school feeding and "head-start" type programs may continue to be an effective way of providing nutrition education and combatting malnutrition among large numbers of children.

C. POPULATION

High population growth rates may put a severe strain on social services and may push agriculture to its limits. Many of the hard-fought gains in the health and education sectors may be eroded. Poverty may increase and problems with rapidly increasing urban populations may result.

Family planning programs will not only help alleviate these pressures, but are also important to improving the health of mothers and children. National campaigns are needed which effectively utilize mass communication techniques. PVOs which are involved in family planning programs should continue their educational activities for women and also work to educate men. Contraceptives should be readily available to those who choose to use them.

F. DEVELOPMENT OF HUMAN RESOURCES

One of the major achievements in Africa in the past two decades has been increased literacy rates. Roughly 37% of all Africans are now literate, and two thirds have received some schooling. Education is the most sought after social service. But African education systems face staggering problems: an ever increasing demand with insufficient resources, including a lack of books, desks, teachers and administrators, inappropriate curricula and language difficulties; an over emphasis on expensive higher education; and insufficient vocational, health and agricultural training.

PVOs have many years of experience in primary education in Africa. This knowledge and experience could be useful to African governments as they work toward improving their educational systems. Vocational, adult literacy, agricultural and health training programs should continue as priorities for the PVO community. Expanded training of indigenous development workers to help them improve their local planning, implementing and evaluation skills is essential. PVOs should promote management and leadership as well as technical training for indigenous personnel.

G. OFF FARM INCOME-GENERATING ACTIVITIES AND SMALL-SCALE INDUSTRY

Small scale enterprises, with under 50 employees, --involved in trading, food processing, traditional crafts, light manufacturing and services-- account for the bulk of employment in the industrial sector and represent a potential source of capital, innovation, and investment.

Small-scale firms are often more efficient, more labor intensive, use more local resources, and develop technology and skills more appropriate to local settings. Supply and demand between the small enterprise sector and the small holder agriculture sector are complementary.

The small scale private sector in Africa should be actively encouraged and strengthened by: 1) creating a climate conducive to its growth including pricing policies, interest rates, regulations, taxation systems, competititive markets, and incentives; 2) increased availability of credit, foreign exchange, management and skills training, services, and infrastructure such as transport and communication systems.

PVOs are particularly well-suited to provide direct assistance to small firms at the local level through the provision of credit schemes and training.

H. ENERGY AND NATURAL RESOURCES

The expansion of dryland farming on marginal lands, overgrazing and deforestation have caused desertification across Africa.

The growing scarcity of fuelwood has forced women to spend long hours searching for fuelwood and has hurt food production since crop residues are burned for fuel. Long-term development and food security can only be accomplished with wise management of the natural resources that support agriculture.

The rural and urban poor have other energy needs as well, which will continue to grow including energy for irrigation, processing and transporting food, small-scale industry, lighting, and refrigeration. A mix of solutions, including reforestation, renewable energy technologies, conservation, and conventional energy will be needed to meet energy demands in Africa.

Several PVOs have been involved in reforestation and renewable energy projects since it became apparent that the 1973 oil price increases were severely affecting African economies and that fuelwood shortages were reaching crisis proportions.

Much has been learned about what works and what doesn't in reforestation projects. There are important social, legal and economic issues involved in tree planting. Trees are needed for multiple uses and projects are approached differently by those who want trees for fuelwood and those concerned with soil conservation. Educating people to the benefits of soil conservation takes time. Finally, it may not be possible to plant trees in quantities which will keep up with demand for fuelwood.

PVOs must undertake more careful social, economic and technical planning and analysis of reforestation projects.

With the exception of improved cookstoves in some areas, successes in renewable energy technologies have been limited. A few highly-publicized failures such as solar cookers caused many people to shy away from these technologies. Projects have been driven by the development of new technologies rather than by the priority energy needs of the poor.

PVOs should look at current and potential energy bottlenecks, particularly in agriculture.

We should improve access to technical knowhow within the PVO community and outside it. PVOs with capabilities in energy supply and usage should take a more active role in identifying energy needs and developing locally-based supply solutions to those needs.

PVOs should also play a role in informing the U.S. government, African governments and other donors of the severity of the rural energy crisis. Due to the current oil glut less and less emphasis is being placed on this sector. AID's energy funding for example has been cut by over 60% between 1981-1986.

IV. PVO ACTION IN THE US

A. Working Together

Much has been accomplished through the active participation of PVOs in consortia. Our commitment to dialogue and cooperation has led to the development of a powerful PVO voice. But we must also move beyond our own community. Other donors are concerned with identifying cost effective methods of supporting development activities and PVOs are increasingly being looked upon to demonstrate competency in this area. We must initiate dialogue and cooperate with other donors so as to enhance the overall development effort.

Our commitment to partnership also requires that we listen to those whom we are trying to help. There are many African scholars, representatives, and visitors in the U.S. with whom we must also initiate a dialogue.

PVOs should also work with African organizations and leaders inside of Africa not just donors or Africans outside the continent.

B. The PVO role in Public Policy

PVOs are an important source of assistance, but we are only one of many development actors. Others--including governments and multilateral institutions--have much greater resources at their disposal to facilitate changes in the lives of the poor.

Thus, to augment and enhance the total development effort, PVOs could do more to become active advocates for international development policies and programs that meet human needs and promote long-term, participatory, and sustainable development.

PVOs should encourage multilateral institutions:

1. To be more human needs focused;
2. To give greater emphasis to food production and small farmers in the context of national food sector strategies;
3. To engage more fully in policy dialogue within the context of national development strategies and lend support for governments' policy reform efforts; and
4. To take the lead in coordinating government and international donor efforts.

PVOs, individually and collectively, should also challenge international economic policies which stand as constraints to the promotion of economic and social justice.

C. Development Education

The African crisis, especially in Ethiopia, is a lens through which we can look at long-term development issues and the need for educational programs which go beyond charity, beyond famine, and beyond Ethiopia. In this process we need to learn from the experience, the talents and the values of Africans who know more than we do about their situation.

Individually and collectively PVOs can, and must, be instrumental in educating the American people to the fact that Africa will require assistance of all kinds for a long time.

1. The current emergency is not a one time phenomenon;
2. Relief, rehabilitation, and development are part of a single continum;
3. The kind of assistance that is required demands a national, and not just an individual commitment; and
4. To achieve such a commitment individual Americans must register their support with their elected representatives.

These propositions should be at the foundation of all Africa-related development education and public relations efforts undertaken by PVOs.

The African emergency has opened up dramatic new media approaches to increase awareness, understanding, and motivation. Special programs could also be developed and directed toward target groups such as students at all levels. Reality of our interdependence and local/global links should be vividly demonstrated in the new approaches.

We need to acknowledge that much of the action for development education takes place outside of the PVO community. We should work closely with allies such as environmental groups, formal educators, and the informal media.

CONCLUSION:

PVOs have a choice. We can continue business as usual. Or we can look at the crisis in Africa as an opportunity, an opportunity to reassess our commitment to long term development in Africa, to ask ourselves some tough questions and to provide some honest answers. We can choose a new beginning: a new commitment to the principles under which we have operated over the years; a commitment to new initiatives such as better coordination among ourselves and with others. We can commit ourselves to do the best of which we are capable.

In all our efforts, we need to exercise humility, acknowledging we do not have all the answers. But where we have found some answers, we must document them better and share them with others.

Above all, Africa's development is and will be the responsibility of Africans. They must make the hard choices. PVOs must make a commitment to a new partnership with Africa, to take some bold steps, but remember we are in business to get out of business.

We, the PVOs, working individually and collectivelly, pledge ourselves to develop responsive initiatives in partnership with Africa.